

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

LIBERTARIAN NATIONAL COMMITTEE

ADDRESS (number and street)

2600 Virginia Ave NW

Suite 200

☐Check if different
than previously
reported. (ACC)

Washington

DC

20037

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00255695

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☒

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

08

01

2009

through

08

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Aaron Starr

Signature of Treasurer

Electronically Filed by Aaron Starr

Date

09

20

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

The Committee wishes to disclose the following: 1) No expenditures designated on Schedule B supporting Line 21b were made on behalf of any specifically identified federal candidate(s). 2) The Libertarian National Committee (LNC) requests address, employer, and occupation information from all contributors whose yearly aggregate contributions exceed \$200.00 and informs them of the requirement of complying with 11 CFR 104.7(b)(1). In the event that the information is not supplied as a result of the initial request, Committee makes a subsequent attempt to collect the information by mail, email, or telephone contact within 30 days of the initial contribution. This 'follow up' request a) clearly asks for the missing information without requesting a contribution, b) informs the contributor of the requirements for reporting such information under federal law, and c) is enclosed with a pre-addressed envelope when sent by postal mail. If the information is submitted after the initial monthly report is filed, the contributor master file is updated and the information is updated in memo entries filed with the next regularly scheduled report. The Committee also makes periodic requests during the year for all contributors to update their contact information and for contributors whose yearly contributions aggregate to more than \$200 to update their Employer/Occupation information.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name
LIBERTARIAN NATIONAL COMMITTEE

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																
6. (a) Cash on Hand January 1 <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2009</td><td></td><td></td><td></td></tr></table>	Y	Y	Y	Y	2009					<table><tr><td>3</td><td>1</td><td>7</td><td>8</td><td>.</td><td>4</td><td>8</td></tr></table>	3	1	7	8	.	4	8	
Y	Y	Y	Y															
2009																		
3	1	7	8	.	4	8												
(b) Cash on Hand at Beginning of Reporting Period	<table><tr><td>2</td><td>6</td><td>3</td><td>7</td><td>2</td><td>.</td><td>7</td><td>2</td></tr></table>	2	6	3	7	2	.	7	2									
2	6	3	7	2	.	7	2											
(c) Total Receipts (from Line 19)	<table><tr><td>9</td><td>2</td><td>4</td><td>7</td><td>7</td><td>.</td><td>8</td><td>6</td></tr></table>	9	2	4	7	7	.	8	6	<table><tr><td>7</td><td>2</td><td>4</td><td>7</td><td>9</td><td>.</td><td>0</td><td>0</td></tr></table>	7	2	4	7	9	.	0	0
9	2	4	7	7	.	8	6											
7	2	4	7	9	.	0	0											
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table><tr><td>1</td><td>1</td><td>8</td><td>8</td><td>5</td><td>.</td><td>0</td><td>5</td></tr></table>	1	1	8	8	5	.	0	5	<table><tr><td>7</td><td>2</td><td>7</td><td>9</td><td>7</td><td>.</td><td>4</td><td>8</td></tr></table>	7	2	7	9	7	.	4	8
1	1	8	8	5	.	0	5											
7	2	7	9	7	.	4	8											
7. Total Disbursements (from Line 31)	<table><tr><td>1</td><td>0</td><td>4</td><td>3</td><td>1</td><td>.</td><td>1</td><td>6</td></tr></table>	1	0	4	3	1	.	1	6	<table><tr><td>7</td><td>1</td><td>3</td><td>4</td><td>3</td><td>.</td><td>6</td><td>5</td></tr></table>	7	1	3	4	3	.	6	5
1	0	4	3	1	.	1	6											
7	1	3	4	3	.	6	5											
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td>1</td><td>4</td><td>5</td><td>3</td><td>8</td><td>.</td><td>9</td><td>2</td></tr></table>	1	4	5	3	8	.	9	2	<table><tr><td>1</td><td>4</td><td>5</td><td>3</td><td>8</td><td>.</td><td>9</td><td>2</td></tr></table>	1	4	5	3	8	.	9	2
1	4	5	3	8	.	9	2											
1	4	5	3	8	.	9	2											
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td>0</td><td>.</td><td>0</td><td>0</td></tr></table>	0	.	0	0													
0	.	0	0															
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td>1</td><td>0</td><td>6</td><td>9</td><td>0</td><td>.</td><td>0</td><td>3</td></tr></table>	1	0	6	9	0	.	0	3									
1	0	6	9	0	.	0	3											

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

LIBERTARIAN NATIONAL COMMITTEE

Report Covering the Period:

From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	33266.84	206674.61
(ii) Unitemized	58961.02	514619.09
(iii) TOTAL (add Lines 11(a)(i) and (ii)	92227.86	721293.70
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	250.00	250.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	92477.86	721543.70
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	3253.30
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	92477.86	724797.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	92477.86	724797.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	104201.66	712826.56	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	104201.66	712826.56	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	110.00	610.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	110.00	610.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	104311.66	713436.56	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	104311.66	713436.56	

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	92477.86	721543.70
34. Total Contribution Refunds (from Line 28(d))	110.00	610.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	92367.86	720933.70
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	104201.66	712826.56
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	3253.30
38. Net Operating Expenditures (subtract Line 37 from Line 36)	104201.66	709573.26

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Michael L. Abrams

Mailing Address 2703 Westgate St

City

Houston

State

TX

Zip Code

77098-1413

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Technology Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78808

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Steve Adams

Mailing Address 2297 Diamond Creek Dr

City

Colorado Springs

State

CO

Zip Code

80921-2975

FEC ID number of contributing
federal political committee.

C

Name of Employer
agilent tech.

Occupation

engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78816

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Arnold Adicoff

Mailing Address 13952 Collier Rd

City

Grass Valley

State

CA

Zip Code

95945-9340

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Cardiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78819

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

155.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Stephen C. Allison

Mailing Address 915 Pine Creek Rd

City

Grantsville

State

WV

Zip Code

26147-8130

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Former Owner, Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.78838

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Sally Amezcua

Mailing Address PO Box 1094

City

Jamul

State

CA

Zip Code

91935-1094

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78851

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Harold Anagnos

Mailing Address 50 N Brockway St Ste 3-1

City

Palatine

State

IL

Zip Code

60067-5068

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lumex Inc

Occupation

President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.78853

Amount of Each Receipt this Period

285.00

Contribution

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Brooke Anderson

Mailing Address 9134 134th Ct NE

City

Redmond

State

WA

Zip Code

98052-6436

FEC ID number of contributing
federal political committee.

C

Name of Employer
CombiMatrix CorpOccupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

417.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78858

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Ray Anderson

Mailing Address PO Box 53

City

Axton

State

VA

Zip Code

24054-0053

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Postal ServiceOccupation
Rural Letter Carrier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78864

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Ruth S. Andrasco

Mailing Address 2410 Kegwood Ln

City

Bowie

State

MD

Zip Code

20715-2821

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dr. Ronald SrokaOccupation
Medical Reception

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.78871

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ruth S. Andrasco

Mailing Address 2410 Kegwood Ln

City

Bowie

State

MD

Zip Code

20715-2821

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dr. Ronald Sroka

Occupation

Medical Reception

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.78872

Amount of Each Receipt this Period

285.00

Contribution

B.

Full Name (Last, First, Middle Initial)

W. Lee Andrus

Mailing Address 5635 Hole In One Dr

City

Prescott

State

AZ

Zip Code

86301-8109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78873

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Raymond A. Arruda

Mailing Address 47 Burt St

City

Acushnet

State

MA

Zip Code

02743-1939

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78898

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

360.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mett B. Ausley

Mailing Address 3412 Waccamaw Shores Rd

City

Lake Waccamaw

State

NC

Zip Code

28450-9442

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cypress Pathology

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78906

Amount of Each Receipt this Period

300.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Richard O. Ayres

Mailing Address 1311 Brentwood Ter

City

Eau Claire

State

WI

Zip Code

54703-1994

FEC ID number of contributing
federal political committee.

C

Name of Employer
Silican Graphics, Inc.

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.78915

Amount of Each Receipt this Period

60.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Simon Bagdigian

Mailing Address 34 Meeting House Ln Apt 211

City

Stow

State

MA

Zip Code

01775-2139

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.78924

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

460.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

John Bagzis

Mailing Address 3635 Cypressdale Dr

City

Spring

State

TX

Zip Code

77388-5020

FEC ID number of contributing
federal political committee.

C

Name of Employer
Chevron

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.78928

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Alvin C. Bailey

Mailing Address PO Box 611

City

Auburn

State

AL

Zip Code

36831-0611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78929

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Dwight E. Baker

Mailing Address 68 Perkins Rd

City

Cartersville

State

VA

Zip Code

23027-9747

FEC ID number of contributing
federal political committee.

C

Name of Employer
Energy Operations

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78933

Amount of Each Receipt this Period

20.00

Contribution

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Jonathan D. Baker

Mailing Address 233 Woodbridge Cir

City

San Mateo

State

CA

Zip Code

94403-4913

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dewey Ballantine

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78935

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Loren L. Baker

Mailing Address 1801 Rimrock Rd Apt O21

City

Barstow

State

CA

Zip Code

92311-5793

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.78936

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Stephen J. Baker

Mailing Address 1301 Cambridge St Apt 411

City

Hopkins

State

MN

Zip Code

55343-1922

FEC ID number of contributing
federal political committee.

C

Name of Employer
Seagate Technology

Occupation
Production Operator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.78938

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Stephen J. Baker

Mailing Address 1301 Cambridge St Apt 411

City

Hopkins

State

MN

Zip Code

55343-1922

FEC ID number of contributing
federal political committee.

C

Name of Employer
Seagate Technology

Occupation

Production Operator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.78939

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

William Bamler

Mailing Address 2381 Port Williams Dr

City

Stow

State

OH

Zip Code

44224-1981

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.78947

Amount of Each Receipt this Period

200.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Richard L. Banks

Mailing Address PO Box 5219

City

Cincinnati

State

OH

Zip Code

45205-0219

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rock - Tenn Co

Occupation

Instrment Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.78948

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Richard L. Banks

Mailing Address PO Box 5219

City

Cincinnati

State

OH

Zip Code

45205-0219

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rock - Tenn Co

Occupation

Instrment Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.78949

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Art Barber

Mailing Address 724 Shore Dr

City

Edgewater

State

MD

Zip Code

21037-2142

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired (US Air Force and
IBM Corp.)

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.78955

Amount of Each Receipt this Period

250.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Benjamin Q. Bell

Mailing Address 501 N Providence Rd Apt 702

City

Media

State

PA

Zip Code

19063-2546

FEC ID number of contributing
federal political committee.

C

Name of Employer
EI Dupont DE Nemours & Co.

Occupation

Corporate Security Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.78998

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Robert C. W. Benedict

Mailing Address 2400 Virginia Ave NW Apt C1125

City

Washington

State

DC

Zip Code

20037-2661

FEC ID number of contributing
federal political committee.

C

Name of Employer
Libertarian National Comm-
ittee, Inc

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.79004

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John A. Bennett

Mailing Address 3345 Woodcock Rd

City

Sequim

State

WA

Zip Code

98382-8819

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79005

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Scott Benson

Mailing Address 609 Parnel Rd

City

Old Hickory

State

TN

Zip Code

37138-1016

FEC ID number of contributing
federal political committee.

C

Name of Employer
NW Airlines

Occupation

Pilot

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79008

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

John Alan Berkley

Mailing Address PO Box 511

City

Stockton

State

KS

Zip Code

67669-0511

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stockton National Bank

Occupation
Banking

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.79014

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John Alan Berkley

Mailing Address PO Box 511

City

Stockton

State

KS

Zip Code

67669-0511

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stockton National Bank

Occupation
Banking

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.50

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79015

Amount of Each Receipt this Period

28.50

Contribution

C.

Full Name (Last, First, Middle Initial)

John M. Bills Jr.

Mailing Address 1614 N Reid Hooker

City

Eads

State

TN

Zip Code

38028-7957

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mid South Emergency Spec-
ialist

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79025

Amount of Each Receipt this Period

35.00

Contribution

SUBTOTAL of Receipts This Page (optional)

113.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Barry B. Bishop

Mailing Address 541 Hamilton St Apt D

City

Costa Mesa

State

CA

Zip Code

92627-8507

FEC ID number of contributing
federal political committee.

C

Name of Employer
AT-Tech

Occupation
Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79030

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Catherine D. Blackmon

Mailing Address 6905 E Osborn Rd Unit D

City

Scottsdale

State

AZ

Zip Code

85251-6223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79035

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Douglas C. Boehler

Mailing Address 828 Broadway

City

Bangor

State

PA

Zip Code

18013-2320

FEC ID number of contributing
federal political committee.

C

Name of Employer
AT&T

Occupation
Customer Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79054

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Joan E. Boltz

Mailing Address 3864 Berkshire Dr

City

Montgomery

State

AL

Zip Code

36109-1641

FEC ID number of contributing
federal political committee.

C

Name of Employer
Assoc. for Senior Citizens

Occupation

Recreational Driector

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.79057

Amount of Each Receipt this Period

137.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Rick Bond

Mailing Address 10672 Hillshire Ave

City

Baton Rouge

State

LA

Zip Code

70810-0714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79058

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Dwayne S. Borgstrand

Mailing Address 832 19th St

City

Cody

State

WY

Zip Code

82414-3839

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79065

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

217.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

John M. Bowers

Mailing Address 9418 Flanders St NE

City

Minneapolis

State

MN

Zip Code

55449-5638

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wells Fargo & Co

Occupation

Retired senior counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79079

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Frank J. Bowman

Mailing Address PO Box 6324

City

Laguna Niguel

State

CA

Zip Code

92607-6324

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79082

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Frank J. Bowman

Mailing Address PO Box 6324

City

Laguna Niguel

State

CA

Zip Code

92607-6324

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79083

Amount of Each Receipt this Period

150.00

Contribution

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Justin W. Boyd

Mailing Address 1350 Coventry Glen Dr Apt 103

City

Round Lake

State

IL

Zip Code

60073-5833

FEC ID number of contributing
federal political committee.

C

Name of Employer
Automated Technologies

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.79084

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Justin W. Boyd

Mailing Address 1350 Coventry Glen Dr Apt 103

City

Round Lake

State

IL

Zip Code

60073-5833

FEC ID number of contributing
federal political committee.

C

Name of Employer
Automated Technologies

Occupation
Accountant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79085

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Michael Brennan

Mailing Address 1629 Rivara Rd

City

Stockton

State

CA

Zip Code

95207-1640

FEC ID number of contributing
federal political committee.

C

Name of Employer
Artesian Natural Foods

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.79107

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Brian J. Brewer

Mailing Address 7528 145th Ave NE

City

Redmond

State

WA

Zip Code

98052-4108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alstom

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79113

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Larry Elton Bright

Mailing Address 925 N Santa Anita Ave

City

Arcadia

State

CA

Zip Code

91006-2329

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jet Propulsion Laboratory

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79125

Amount of Each Receipt this Period

40.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Paul Brochon

Mailing Address 8875 Ridge Ave Apt 33

City

Philadelphia

State

PA

Zip Code

19128-2018

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Builders Inc

Occupation
Systems Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79128

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Christopher M. Brookover

Mailing Address 132 Fortnightly Blvd

City

Herndon

State

VA

Zip Code

20170-3754

FEC ID number of contributing
federal political committee.

C

Name of Employer
ETG, Inc.

Occupation

Sr. Tech Analysis

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79131

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

William Brooks

Mailing Address 10814 Pinkney Ln

City

Austin

State

TX

Zip Code

78739-1637

FEC ID number of contributing
federal political committee.

C

Name of Employer
Frontier Associates, LLC

Occupation

Energy Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79133

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Chris Bubash

Mailing Address 1230 Green Timber Trl

City

Dayton

State

OH

Zip Code

45458-9336

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79154

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Richard A. Bulka

Mailing Address 21 Gary St

City

Lindenhurst

State

NY

Zip Code

11757-3842

FEC ID number of contributing
federal political committee.

C

Name of Employer
Twin County Swim Pool Com-
pany

Occupation

Swim Pool Mechanic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.79159

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Wallace Howard Burton

Mailing Address 213 S 4th St

City

Festus

State

MO

Zip Code

63028-2210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79177

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

D. J. Cahill

Mailing Address 23212 Peach Tree Road

City

Clarksburg

State

MD

Zip Code

20871

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79195

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Tim Carrico

Mailing Address 1474 Vistazo St W

City

Bel Tiburon

State

CA

Zip Code

94920-1713

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79227

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Lee Cayer

Mailing Address 222 W Mission Ave Ste 101

City

Spokane

State

WA

Zip Code

99201-2347

FEC ID number of contributing
federal political committee.

C

Name of Employer
PDS

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79240

Amount of Each Receipt this Period

500.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Allen E. Chantelois

Mailing Address 5555 N Meade St

City

Appleton

State

WI

Zip Code

54913-8382

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHN

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79255

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

630.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Allen E. Chantelois

Mailing Address 5555 N Meade St

City

Appleton

State

WI

Zip Code

54913-8382

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHN

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79256

Amount of Each Receipt this Period

500.00

Contribution

B.

Full Name (Last, First, Middle Initial)

William Mark Clifford

Mailing Address 2786 Palo Verde Dr

City

Avon Park

State

FL

Zip Code

33825-8964

FEC ID number of contributing
federal political committee.

C

Name of Employer
Soil and Water Cons Brd

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79284

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Cynthia Colarusso

Mailing Address 1654 Glendola Rd

City

Wall Township

State

NJ

Zip Code

07719-4506

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Nurse

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79291

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

560.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Michael C. Colley

Mailing Address 444 Magnolia Dr

City

Gulf Shores

State

AL

Zip Code

36542-4408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired (U.S. Navy)

Occupation

Vice Admiral, Ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1888.80

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79296

Amount of Each Receipt this Period

200.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Michael C. Colley

Mailing Address 444 Magnolia Dr

City

Gulf Shores

State

AL

Zip Code

36542-4408

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired (U.S. Navy)

Occupation

Vice Admiral, Ret.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1988.80

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 2 / 2 0 0 9

Transaction ID: SA11AI.79297

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John A. Collins

Mailing Address 318 Indian Trce # 126

City

Weston

State

FL

Zip Code

33326-2996

FEC ID number of contributing
federal political committee.

C

Name of Employer
Broward Community College

Occupation

Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79298

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Garry Condrey

Mailing Address 1324 Hawksmoor Way

City

Grovetown

State

GA

Zip Code

30813-5867

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.79309

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Wayne Confer

Mailing Address 3321 Edinburgh Rd

City

Allentown

State

PA

Zip Code

18104-2617

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79310

Amount of Each Receipt this Period

85.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Arvil G. Conk

Mailing Address 181 Conks Ln

City

Smyrna

State

DE

Zip Code

19977-3578

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79311

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Craig B. Coogan

Mailing Address PO Box 691597

City

West Hollywood

State

CA

Zip Code

90069-9597

FEC ID number of contributing
federal political committee.

C

Name of Employer
CEOS

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79317

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Curtis Cornell

Mailing Address 414 Lincoln Ave

City

Alameda

State

CA

Zip Code

94501-3236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Comcast

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79339

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mike Corvin

Mailing Address 3516 Bermuda Dr

City

Birmingham

State

AL

Zip Code

35210-3004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Auctioneer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79345

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1060.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Edward Crabb

Mailing Address PO Box 364

City

Oxford

State

MD

Zip Code

21654-0364

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

builder/designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79354

Amount of Each Receipt this Period

285.00

Contribution

B.

Full Name (Last, First, Middle Initial)

J.D. Crowover

Mailing Address 2394 Old Monrovia Rd NW

City

Huntsville

State

AL

Zip Code

35806-1558

FEC ID number of contributing
federal political committee.

C

Name of Employer
DOD

Occupation

Civil Servant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.79372

Amount of Each Receipt this Period

285.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Cyril Crume

Mailing Address 11900 Edgewater Dr Apt 709

City

Lakewood

State

OH

Zip Code

44107-1759

FEC ID number of contributing
federal political committee.

C

Name of Employer
St. James' Church

Occupation

Clergy

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79373

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

595.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Jeremy S. Davis

Mailing Address 7539 Brompton St

City

Houston

State

TX

Zip Code

77025-2267

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.79410

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Jeremy S. Davis

Mailing Address 7539 Brompton St

City

Houston

State

TX

Zip Code

77025-2267

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.79411

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Eric Deister

Mailing Address 345 E Ohio St Apt 2308

City

Chicago

State

IL

Zip Code

60611-4059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79426

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Elaine DiMasi

Mailing Address 16 Old Rocky Point Rd

City

Miller Place

State

NY

Zip Code

11764-2026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brookhaven Nat'l Labs

Occupation

Research Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79453

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Patrick J. Dixon

Mailing Address 5002 Sundown St

City

Lago Vista

State

TX

Zip Code

78645-6066

FEC ID number of contributing
federal political committee.

C

Name of Employer
DPAS INC

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79456

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Patrick J. Dixon

Mailing Address 5002 Sundown St

City

Lago Vista

State

TX

Zip Code

78645-6066

FEC ID number of contributing
federal political committee.

C

Name of Employer
DPAS INC

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79457

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1080.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Michael L. Dudley

Mailing Address 4680 E McCloy Ave

City

Port Clinton

State

OH

Zip Code

43452-4231

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79485

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Michael L. Dudley

Mailing Address 4680 E McCloy Ave

City

Port Clinton

State

OH

Zip Code

43452-4231

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.79486

Amount of Each Receipt this Period

285.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Michael J. Duffy

Mailing Address 1030 N Monroe St

City

Arlington

State

VA

Zip Code

22201-4504

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hospitality Partners

Occupation

Hotel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.79490

Amount of Each Receipt this Period

285.00

Contribution

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

John M. Duley

Mailing Address 13 Frenchmans Hill Rd

City

Bar Harbor

State

ME

Zip Code

04609-7741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Galyn's Galley

Occupation

Restaurant Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79492

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Paul D. Eccles

Mailing Address PO Box 1943

City

Huntington Beach

State

CA

Zip Code

92647-1943

FEC ID number of contributing
federal political committee.

C

Name of Employer
Logicon-INRI

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79514

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Terrill I. Elniff

Mailing Address 21 Lynnstone Ct

City

Asheville

State

NC

Zip Code

28805-1905

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79539

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Daniel Enright

Mailing Address 375 Perkins Trl

City

Deer Lodge

State

TN

Zip Code

37726-3905

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79543

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John P. Evans

Mailing Address 515 Lake St S Apt 305

City

Kirkland

State

WA

Zip Code

98033-6446

FEC ID number of contributing
federal political committee.

C

Name of Employer
Solutions, IQ

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79556

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Richard Evey

Mailing Address 4150 Trim Tree Dr

City

Morganton

State

NC

Zip Code

28655-8431

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79559

Amount of Each Receipt this Period

45.00

Contribution

SUBTOTAL of Receipts This Page (optional)

175.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Barry Fagin

Mailing Address 2135 Wickes Rd

City

Colorado Springs

State

CO

Zip Code

80919-4842

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Air Force Academy

Occupation
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79562

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John A. Fehsenfeld

Mailing Address PO Box 35200

City

Las Vegas

State

NV

Zip Code

89133-5200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79582

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Patrick Fleck

Mailing Address PO Box 573

City

Kenai

State

AK

Zip Code

99611-0573

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marathon Pipe Line, LLC

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79619

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

315.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Dave Flood

Mailing Address 21623 NE Interlachen Ln

City

Fairview

State

OR

Zip Code

97024-8722

FEC ID number of contributing
federal political committee.

C

Name of Employer
City of Portland, Oregon

Occupation

Fire Inspector

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79620

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Robert Ford

Mailing Address 614 Northtown

City

Mountain Home

State

AR

Zip Code

72653-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer
MCAMA

Occupation

Physician

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79629

Amount of Each Receipt this Period

85.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Perry Forstrom

Mailing Address 1215 Panini Dr

City

Henderson

State

NV

Zip Code

89052-3143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Forstrom Bancorporation

Occupation

Banker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79634

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

145.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

William J. Forte

Mailing Address 402 Hickory St

City

Rome

State

NY

Zip Code

13440-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer
The State Ins Fund

Occupation

Case Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79635

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Steven Fox

Mailing Address 25 Cushing Dr

City

Mill Valley

State

CA

Zip Code

94941-1060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79649

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Russell R. Freeman

Mailing Address 103 Westmont Rd

City

Syracuse

State

NY

Zip Code

13219-2440

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lockheed Martin

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79657

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1060.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

John Friedel

Mailing Address 4104 Spring Way Cir

City

Valrico

State

FL

Zip Code

33596-7058

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tampa Electric co.

Occupation
Supervisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79658

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Kurtis Wayne Fuessley

Mailing Address PO Box 62

City

Coggon

State

IA

Zip Code

52218-0062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rockwell Collins

Occupation
Maintenance Mechanic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.79662

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

David Lee Fuquay

Mailing Address 12022 Starboard Dr Apt 304

City

Reston

State

VA

Zip Code

20194-4370

FEC ID number of contributing
federal political committee.

C

Name of Employer
Incogen Inc

Occupation
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79669

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Randy Gann

Mailing Address 6335 S 72nd East Ave

City

Tulsa

State

OK

Zip Code

74133-1122

FEC ID number of contributing
federal political committee.

C

Name of Employer
EDS

Occupation

Computer Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79676

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Peggy Garner

Mailing Address 218 Diane Dr

City

Madison

State

TN

Zip Code

37115-2564

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79681

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Roger V. Gary

Mailing Address 1119 W Ashby Pl

City

San Antonio

State

TX

Zip Code

78201-5737

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79690

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

185.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

June R. Genis

Mailing Address 142 Rainbow Dr # 4275

City

Livingston

State

TX

Zip Code

77399-1042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79699

Amount of Each Receipt this Period

85.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Allyn K. Gerard

Mailing Address PO Box 559

City

Coarsegold

State

CA

Zip Code

93614-0559

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79703

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Jay Gillotte

Mailing Address 8220 David Hwy

City

Lyons

State

MI

Zip Code

48851-9755

FEC ID number of contributing
federal political committee.

C

Name of Employer
Presort Services, Inc.

Occupation

Bus. Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79719

Amount of Each Receipt this Period

120.00

Contribution

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Lelon Ginn

Mailing Address 618 Mimosa Dr

City

Denton

State

TX

Zip Code

76201-0859

FEC ID number of contributing
federal political committee.

C

Name of Employer
Accelerated PM

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79724

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

C. Robert Gladstone

Mailing Address 1046 Iroquois Blvd

City

Royal Oak

State

MI

Zip Code

48067-1109

FEC ID number of contributing
federal political committee.

C

Name of Employer
St Clair Systems, Incl

Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79728

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Richard Goers

Mailing Address 234 N Quincy St

City

Hinsdale

State

IL

Zip Code

60521-3052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79743

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Darrell Goldman

Mailing Address 4725 N County Road 25 W

City

Bainbridge

State

IN

Zip Code

46105-9695

FEC ID number of contributing
federal political committee.

C

Name of Employer
Quaker Chemical

Occupation

Site Coordinator

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

332.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79745

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Frederick J. Graboske

Mailing Address 101 N Van Buren St

City

Rockville

State

MD

Zip Code

20850-1860

FEC ID number of contributing
federal political committee.

C

Name of Employer
Millican & Assoc

Occupation

Project Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.79774

Amount of Each Receipt this Period

300.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Gene Grant

Mailing Address 402 Dunham Massie Dr

City

Hampton

State

VA

Zip Code

23669-1744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ovusoft, LLC

Occupation

Managing Partner

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79790

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

355.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Pete Guard

Mailing Address PO Box 6925

City

Brandon

State

FL

Zip Code

33508-6015

FEC ID number of contributing
federal political committee.

C

Name of Employer
American Automobile Assoc-
iation

Occupation

Computer Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79813

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Douglas Cecil Hancock

Mailing Address PO Box 543

City

Wayne

State

IL

Zip Code

60184-0543

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79848

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Terry Hansen

Mailing Address 3808 E 109 N

City

Idaho Falls

State

ID

Zip Code

83401-5432

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hansen Group Company

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.79857

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Wayne E. Harley

Mailing Address 1315 Richmond Dr

City

Melbourne

State

FL

Zip Code

32935-5325

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rockwell Collins Avionics

Occupation

Sr Eng Test Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79866

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Bert G. Hassler

Mailing Address 128 Elkins Ave

City

Arcadia

State

CA

Zip Code

91006-1711

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.79889

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Eric Haszlakiewicz

Mailing Address 1250 W Argyle St #GF

City

Chicago

State

IL

Zip Code

60640-3509

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79891

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Rachel Hawkrige

Mailing Address 10522 Lake City Way NE Ste C103

City

Seattle

State

WA

Zip Code

98125-7750

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79899

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Ken Heinemann

Mailing Address 3901 S Via Del Ruisenor

City

Green Valley

State

AZ

Zip Code

85614-5017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79915

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Brad W. Henry

Mailing Address 3606 41st Ave W

City

Seattle

State

WA

Zip Code

98199-1836

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mindworks, Inc.

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79930

Amount of Each Receipt this Period

10.00

Contribution

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Phillip Michael Herrin

Mailing Address 135 Ray Ridge Rd

City

Albany

State

KY

Zip Code

42602-6936

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Army Corps Of Eng.

Occupation

PowerPlant Operator

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.79933

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Regan Philip Hess

Mailing Address 282382 Us Highway 101

City

Port Townsend

State

WA

Zip Code

98368-9396

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79935

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Donald C. Hildebrant

Mailing Address 22543 S Merlin Ct

City

Joliet

State

IL

Zip Code

60404-6667

FEC ID number of contributing
federal political committee.

C

Name of Employer
Commonwealth Edison Co.

Occupation

Engineer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79945

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Paul Hilstad

Mailing Address 33 Marsh Edge Ln

City

Johns Island

State

SC

Zip Code

29455-5731

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.79947

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Albert C. Hinkle

Mailing Address 3707 Meridian Ave

City

San Jose

State

CA

Zip Code

95124-3825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79949

Amount of Each Receipt this Period

20.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Albert C. Hinkle

Mailing Address 3707 Meridian Ave

City

San Jose

State

CA

Zip Code

95124-3825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.79950

Amount of Each Receipt this Period

20.00

Contribution

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Albert C. Hinkle

Mailing Address 3707 Meridian Ave

City

San Jose

State

CA

Zip Code

95124-3825

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.79951

Amount of Each Receipt this Period

28.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Richard T. Hogan

Mailing Address 4425 Shorewood Dr N

City

Hoffman Estates

State

IL

Zip Code

60192-1018

FEC ID number of contributing
federal political committee.

C

Name of Employer
Zurich North America

Occupation
Systems Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.79967

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Douglas Hoiles

Mailing Address 10047 E Acampo Rd

City

Acampo

State

CA

Zip Code

95220-9480

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79969

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

128.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Pamela J. Hoiles

Mailing Address 25 Hillside Rd

City

Greenwich

State

CT

Zip Code

06830-4834

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79970

Amount of Each Receipt this Period

150.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Stephen House

Mailing Address 1053 Harlan Dr

City

San Jose

State

CA

Zip Code

95129-3021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hughes Aircraft Co.

Occupation

Software Engineer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79985

Amount of Each Receipt this Period

40.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Andrew J. Howe

Mailing Address 15700 Mahogany Cir Apt 410

City

Gaithersburg

State

MD

Zip Code

20878-4639

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79998

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

220.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Barbara Howe

Mailing Address 5046 Tar Hill Dr

City

Oxford

State

NC

Zip Code

27565-5416

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.79999

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Dr. Thomas Alexander Hunter III

Mailing Address 3465 Meadow Rdg

City

Redding

State

CT

Zip Code

06896-3230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80023

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Peter J. Impala

Mailing Address 29640 Valle Olvera

City

Temecula

State

CA

Zip Code

92591-1635

FEC ID number of contributing
federal political committee.

C

Name of Employer
Art Rodriguez & Associates

Occupation

brokers & consultants

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80037

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Richard E. James

Mailing Address 700 Greystone Park NE

City

Atlanta

State

GA

Zip Code

30324-5297

FEC ID number of contributing
federal political committee.

C

Name of Employer
R. James Properties, Inc.

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.80058

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Wesley Johnson

Mailing Address 799 Weeping Willow Dr

City

Powder Springs

State

GA

Zip Code

30127-6230

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.80099

Amount of Each Receipt this Period

110.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John Brady Jones

Mailing Address 402 Massie St

City

Atlanta

State

TX

Zip Code

75551-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ward Timber Co., Inc.

Occupation

Forester

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80109

Amount of Each Receipt this Period

60.00

Contribution

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Jon Kalb

Mailing Address 5286 Crestline Way

City

Pleasanton

State

CA

Zip Code

94566-5470

FEC ID number of contributing
federal political committee.

C

Name of Employer
Microsoft

Occupation

Software Engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80131

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Daniel M. Karlan

Mailing Address 97 Manhattan Ave

City

Waldwick

State

NJ

Zip Code

07463-2228

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self employed

Occupation

Author

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.80139

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Leonard Karpinski

Mailing Address 2285 SW Creekside Ln

City

McMinnville

State

OR

Zip Code

97128-8948

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nana/Test, Anchorage

Occupation

Elec/Instr Designer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80140

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Erik Christopher Kelley

Mailing Address 6617 S Palm Dr

City

Tempe

State

AZ

Zip Code

85283-3705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Laboratory Corporation of
America

Occupation
Technologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.80156

Amount of Each Receipt this Period

150.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Paul Kelley

Mailing Address 88 Rocca Dr

City

Fairfax

State

CA

Zip Code

94930-1226

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medtronic/AVE

Occupation
Planning/Forecasting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80158

Amount of Each Receipt this Period

10.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Greg John Kerkow

Mailing Address PO Box 642

City

Shakopee

State

MN

Zip Code

55379-0642

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80167

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

210.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Richard S. Kerr

Mailing Address 483 Rebecca St

City

Morgantown

State

WV

Zip Code

26505-2246

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.80171

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Zaeem A. Khan

Mailing Address PO Box 810696

City

Boca Raton

State

FL

Zip Code

33481-0696

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dr Gilbert R Panzer M.D.

Occupation
Office Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80174

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Brian Kiernan

Mailing Address 435 Carpenters Cove Ln

City

Downingtown

State

PA

Zip Code

19335-4541

FEC ID number of contributing
federal political committee.

C

Name of Employer
Interdigital Comm Corp

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80177

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

John A. Kleiner

Mailing Address 46 Greenfield Dr

City

Moraga

State

CA

Zip Code

94556-1333

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80197

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Richard Konjarevich

Mailing Address 6095 Trophy Ave

City

Howell

State

MI

Zip Code

48855-8275

FEC ID number of contributing
federal political committee.

C

Name of Employer
GM

Occupation
Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80207

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John R. Kuhn

Mailing Address 42 Church St

City

Charleston

State

SC

Zip Code

29401-2742

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cothran Law Office LLC

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80235

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Rebecca A. Kurk

Mailing Address 6429 City West Pkwy
Apt 4306

City State Zip Code
Eden Prairie MN 55344-3282

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80239

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Steven M. Kymes

Mailing Address 6821 Wanda Ave

City State Zip Code
Saint Louis MO 63116-2122

FEC ID number of contributing
federal political committee.

C

Name of Employer
Washington University

Occupation
Researcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80242

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Bruce K. Lagasse

Mailing Address 1029 Ringneck Way

City State Zip Code
Sparks NV 89441-7815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.76

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80249

Amount of Each Receipt this Period

40.00

Contribution

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ben Lake

Mailing Address 7601 Churchill Way Apt 1729

City

Dallas

State

TX

Zip Code

75251-1946

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wieck Media

Occupation

Web Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80250

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

George Peter Lamb

Mailing Address 137 Orchard Oak Cir

City

Campbell

State

CA

Zip Code

95008-2133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Network Design Communicat-
ions

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80251

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Bruce A. Landers

Mailing Address 20 Saint Andrews Dr SE

City

Cartersville

State

GA

Zip Code

30120-6926

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80254

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 152

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Paul Langford

Mailing Address 6962 S Ulster Cir

City

Centennial

State

CO

Zip Code

80112-1304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Epos Technology Group, In-
c.

Occupation

IT Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80261

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Jonathan Lee

Mailing Address 1103 Saint John Ave

City

Dyersburg

State

TN

Zip Code

38024-3370

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nucor Steel-AR

Occupation

Electrician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80290

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

William Levins

Mailing Address 71 Baynes Ave

City

Gloucester City

State

NJ

Zip Code

08030-1831

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sunoco, Inc

Occupation

Process Operator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80306

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Southard Lippincott

Mailing Address 74 Tyler Ter

City

Newton Center

State

MA

Zip Code

02459-1814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80325

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Jeff Long

Mailing Address PO Box 35

City

Byron

State

MN

Zip Code

55920-0035

FEC ID number of contributing
federal political committee.

C

Name of Employer
anethetist

Occupation
Mayo Clinic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80330

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Raymond C. Loughlin

Mailing Address 6 Wilkens Dr
Ste 207

City

Plainville

State

MA

Zip Code

02762-5019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alliance Electric, Inc.

Occupation
Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.80339

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Vaughan T. Lund

Mailing Address 1503 Brook Valley Ln NE

City

Atlanta

State

GA

Zip Code

30324-3212

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cooperative Technologies

Occupation
Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80352

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Kevin J. Lynch

Mailing Address PO Box 711

City

Algona

State

IA

Zip Code

50511-0711

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80356

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Ronald MacArtney

Mailing Address 739 Franklin St

City

Hinsdale

State

IL

Zip Code

60521-3614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80359

Amount of Each Receipt this Period

35.00

Contribution

SUBTOTAL of Receipts This Page (optional)

135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Roland W. Maddrey

Mailing Address 732 N Main St

City

Mooreville

State

NC

Zip Code

28115-2314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80364

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Roland R. Manarin

Mailing Address 2100 Skyline Dr

City

Elkhorn

State

NE

Zip Code

68022-1743

FEC ID number of contributing
federal political committee.

C

Name of Employer
Manarin Investment Counsel
(Self-Emplo

Occupation

Investment Counselor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.80377

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Leonard Martina

Mailing Address 421 Livingston Dr

City

Charlotte

State

NC

Zip Code

28211-4637

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80402

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Stephen Paul Marting

Mailing Address 1232 Sunset Ct

City

Herndon

State

VA

Zip Code

20170-4121

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80403

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

David R. Mason

Mailing Address 2234 E Crosby Rd

City

Carrollton

State

TX

Zip Code

75006-7744

FEC ID number of contributing
federal political committee.

C

Name of Employer
Verizon Wireless

Occupation

Telecom Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80404

Amount of Each Receipt this Period

200.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Thomas P. Mathers

Mailing Address 5626 Ruatan St

City

Berwyn Heights

State

MD

Zip Code

20740-4312

FEC ID number of contributing
federal political committee.

C

Name of Employer
NCBFAA Inc.

Occupation

Dircomm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80416

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

280.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Thomas P. Mathers

Mailing Address 5626 Ruatan St

City

Berwyn Heights

State

MD

Zip Code

20740-4312

FEC ID number of contributing
federal political committee.

C

Name of Employer
NCBFAA Inc.

Occupation
Dircomm

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.80417

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Wesley G. McCain

Mailing Address 2 Park Ave Rm 1522

City

New York

State

NY

Zip Code

10016-5701

FEC ID number of contributing
federal political committee.

C

Name of Employer
TCM

Occupation
Economist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80436

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Lewis McCarthy

Mailing Address 4750 Torrey Pines Cir

City

San Jose

State

CA

Zip Code

95124-4417

FEC ID number of contributing
federal political committee.

C

Name of Employer
XETI

Occupation
Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80439

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Michael J. McClung

Mailing Address PO Box 463

City

Blackwell

State

OK

Zip Code

74631-0463

FEC ID number of contributing
federal political committee.

C

Name of Employer
Werner Enterprises

Occupation
Truck Driver

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.80441

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Donald L. McCluskey

Mailing Address 14155 Martin Rd

City

Warren

State

MI

Zip Code

48088-6327

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rayethon Support Services
Co.

Occupation
Millwright

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80442

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

J.W. McConachie

Mailing Address 421 May St

City

Elmhurst

State

IL

Zip Code

60126-3634

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.80444

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Fred K. McCoy

Mailing Address PO Box 8390

City

Alexandria

State

VA

Zip Code

22306-8390

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARMY

Occupation
Soldier

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.80450

Amount of Each Receipt this Period

285.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Raymond McGee

Mailing Address 1718 E Gadsden St

City

Pensacola

State

FL

Zip Code

32501-4329

FEC ID number of contributing
federal political committee.

C

Name of Employer
Freelance

Occupation
Copywriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80470

Amount of Each Receipt this Period

15.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Scott McGhee

Mailing Address 9607 61st Ave S

City

Seattle

State

WA

Zip Code

98118-5822

FEC ID number of contributing
federal political committee.

C

Name of Employer
Opticon, Inc

Occupation
Software Engineering Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 7 / 2 0 0 9

Transaction ID: SA11AI.80472

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Douglas R. McKissack

Mailing Address 7 Bitterroot Ln

City

Savannah

State

GA

Zip Code

31419-9507

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gulfstream Aerospace

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.80479

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Michael S. McLane

Mailing Address 215 Hancock Ln

City

Athens

State

GA

Zip Code

30605-4741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80480

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Daniel McPherson

Mailing Address 5250 E 65th S

City

Idaho Falls

State

ID

Zip Code

83406-8273

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.80488

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1080.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Gregory A. Meckling

Mailing Address 19115 14th Ct NW

City

Shoreline

State

WA

Zip Code

98177-2756

FEC ID number of contributing
federal political committee.

C

Name of Employer
Turner Construction

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80493

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Peter A. Meister

Mailing Address 649 Cutter Ln

City

Elk Grove Village

State

IL

Zip Code

60007-6925

FEC ID number of contributing
federal political committee.

C

Name of Employer
UOP

Occupation
Senior Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80499

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Allen R Merriman

Mailing Address 40 Governor Wentworth Rd

City

Amherst

State

NH

Zip Code

03031-3008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Avaya, Inc.

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80508

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Jason W. Miller

Mailing Address 517 10th Ave SE

City

Jamestown

State

ND

Zip Code

58401-4438

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jamestown college

Occupation

Deveolpment officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80521

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Warren L. Miller

Mailing Address PO Box 98

City

Berlin

State

OH

Zip Code

44610-0098

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Postal Service

Occupation

Postal Worker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80528

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Carl Minie

Mailing Address 115 G St

City

Salt Lake City

State

UT

Zip Code

84103-2954

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gold Systems

Occupation

Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80534

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Yehia Mishriki

Mailing Address 4752 Belmont Dr

City

Emmaus

State

PA

Zip Code

18049-1227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lehigh Valley Hospital

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80537

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Louis Misko

Mailing Address 4317 Argos Dr

City

San Diego

State

CA

Zip Code

92116-2329

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Navy

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80538

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Stephen W. Modzelewski

Mailing Address 1578 River Rd

City

New Hope

State

PA

Zip Code

18938-9267

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Watermark Group

Occupation
Computer Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80547

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Robert Moore

Mailing Address 398 Plains Rd

City

Lisbon

State

NH

Zip Code

03585-6923

FEC ID number of contributing
federal political committee.

C

Name of Employer
Solid Earth, Inc.

Occupation

Geographer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80561

Amount of Each Receipt this Period

47.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Ronald G. Moore

Mailing Address 208 E 13th St Apt 3F

City

New York

State

NY

Zip Code

10003-5604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marketing Technologies Gr-
oup

Occupation

Computer Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80562

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Ronald G. Moore

Mailing Address 208 E 13th St Apt 3F

City

New York

State

NY

Zip Code

10003-5604

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marketing Technologies Gr-
oup

Occupation

Computer Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80563

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

147.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Edward Morgan

Mailing Address PO Box 81585

City

Fairbanks

State

AK

Zip Code

99708-1585

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.80567

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

William E. Morris

Mailing Address 2124 Brandywood Dr

City

Wilmington

State

DE

Zip Code

19810-2435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80574

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

William E. Morris

Mailing Address 2124 Brandywood Dr

City

Wilmington

State

DE

Zip Code

19810-2435

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.80575

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Chuck Moulton

Mailing Address 4220 Hunt Club Cir Apt 811

City

Fairfax

State

VA

Zip Code

22033-4040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Villanova Law School

Occupation
Student

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80587

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Cynthia L. Myers

Mailing Address 111 Elmwood Ave

City

Narberth

State

PA

Zip Code

19072-2409

FEC ID number of contributing
federal political committee.

C

Name of Employer
Paul, Reich & Myers, P.C.

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80598

Amount of Each Receipt this Period

200.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Jeffrey T. Nelson

Mailing Address 1224 Shakopee Ave E Apt 206

City

Shakopee

State

MN

Zip Code

55379-2859

FEC ID number of contributing
federal political committee.

C

Name of Employer
Anchor Glass Container

Occupation
MASTER ELECTRICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.80614

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

David L. Neumann

Mailing Address 207 Wingate Dr

City

Williamsburg

State

VA

Zip Code

23185-2996

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.80617

Amount of Each Receipt this Period

75.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John Neurauter

Mailing Address 1501 N Cleveland Ave 1st Floor

City

Chicago

State

IL

Zip Code

60610

FEC ID number of contributing
federal political committee.

C

Name of Employer
IGC

Occupation

Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.80621

Amount of Each Receipt this Period

250.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Alexander M. Newton

Mailing Address 13055 Herrick Ave

City

Sylmar

State

CA

Zip Code

91342-3941

FEC ID number of contributing
federal political committee.

C

Name of Employer
Parsons Brinckerhoff

Occupation

Civil Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.80626

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

425.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 / 152

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Byron K. Nichols

Mailing Address 9000 Holly Street

City

Kansas City

State

MO

Zip Code

64114-3528

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Gov'tOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80630

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Bill Olinger

Mailing Address 18 Imperial PI Unit 5G

City

Providence

State

RI

Zip Code

02903-4643

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80669

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

J. Joseph Ory

Mailing Address 2024 Mary Ellen Dr

City

Brunswick

State

OH

Zip Code

44212-4093

FEC ID number of contributing
federal political committee.

C

Name of Employer
National City CorpOccupation
Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80686

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 76 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Charles Pederson

Mailing Address 3143 Bloomington Ave S None

City

Minneapolis

State

MN

Zip Code

55407-1710

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.81656

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Arjen Peirce

Mailing Address 3001 Coleridge Rd

City

Cleveland

State

OH

Zip Code

44118-3526

FEC ID number of contributing
federal political committee.

C

Name of Employer
Calix

Occupation
Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80736

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Joseph H. Perry

Mailing Address 7314 Daisy St

City

Columbus

State

GA

Zip Code

31904-2606

FEC ID number of contributing
federal political committee.

C

Name of Employer
Columbus State Univ.

Occupation
System Support Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.80752

Amount of Each Receipt this Period

285.00

Contribution

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 77 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

James E. Phillips

Mailing Address 4406 Congdon Rd

City

Williamson

State

NY

Zip Code

14589-9301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Harris Corp

Occupation

Manufacturing Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80759

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Carol Piwowar

Mailing Address 7121 Lonzo St

City

Tujunga

State

CA

Zip Code

91042-1461

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80777

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Jeff Pizanti

Mailing Address 4836 W Braddock Rd

City

Alexandria

State

VA

Zip Code

22311-4886

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Navy

Occupation

Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80780

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Michele R. Poague

Mailing Address 21079 E Mineral Dr

City

Aurora

State

CO

Zip Code

80016-1927

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bavaria Inn

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80781

Amount of Each Receipt this Period

75.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Chad Polenz

Mailing Address 225 Schoolhouse Rd # 1

City

Albany

State

NY

Zip Code

12203-5957

FEC ID number of contributing
federal political committee.

C

Name of Employer
US Navy

Occupation
E4

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80783

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Pamela P. Potter

Mailing Address 538 Spring Place Rd NE

City

White

State

GA

Zip Code

30184-2232

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80790

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

610.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Dan Price

Mailing Address 1248 Robbin Dr

City

Port Orange

State

FL

Zip Code

32129-4088

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Glass Act

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80799

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Earl Prochaska

Mailing Address 8 Lauretta Dr

City

Highland

State

NY

Zip Code

12528-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.80804

Amount of Each Receipt this Period

60.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Nick Rajnovic

Mailing Address 8976 33rd Ave

City

Kenosha

State

WI

Zip Code

53142-5410

FEC ID number of contributing
federal political committee.

C

Name of Employer
Deltrol Controls

Occupation

Electrical Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80828

Amount of Each Receipt this Period

60.00

Contribution

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Gilbert K. Ranney

Mailing Address 6682 Gate Hill Cir

City

Huntington Beach

State

CA

Zip Code

92648-2109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80834

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

William B. Redpath

Mailing Address 827 Anthony Ct SE

City

Leesburg

State

VA

Zip Code

20175-5629

FEC ID number of contributing
federal political committee.

C

Name of Employer
BIA Financial Network, In-
c.

Occupation

Financial Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

766.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.80849

Amount of Each Receipt this Period

83.34

Contribution

C.

Full Name (Last, First, Middle Initial)

John R. Reid

Mailing Address 690 Zink Ave

City

Santa Barbara

State

CA

Zip Code

93111-2809

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80857

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

153.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

John H. Ring

Mailing Address 2901 Oakdale Rd

City

Charlotte

State

NC

Zip Code

28216-1476

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80890

Amount of Each Receipt this Period

25.00

Contribution

B.

Full Name (Last, First, Middle Initial)

William A. Ringrose

Mailing Address 64 Orchard Rd

City

Kensington

State

CT

Zip Code

06037-3411

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vanasse Hangen Brustlin,
Inc

Occupation

Computer Programmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80891

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Robert Scott Rose

Mailing Address 2208 Kelly Rd

City

Apex

State

NC

Zip Code

27502-9562

FEC ID number of contributing
federal political committee.

C

Name of Employer
IBM Corp.

Occupation

Senior IT Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80934

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Thomas Rose

Mailing Address 1503 Morgan Rd
PO Box 518

City Benson State NC Zip Code 27504-0518

FEC ID number of contributing
federal political committee.

C

Name of Employer
L J Rogers Jr

Occupation
transportation broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

685.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80935

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Brandon Ross

Mailing Address 15 Wieuca Trce NE

City Atlanta State GA Zip Code 30342-3856

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sockeye Networks

Occupation
computer engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80938

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Kelley L. Ross

Mailing Address 13403 Weddington St

City Sherman Oaks State CA Zip Code 91401-5928

FEC ID number of contributing
federal political committee.

C

Name of Employer
LA Valley College

Occupation
College Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.80941

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

230.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Kelley L. Ross

Mailing Address 13403 Weddington St

City

Sherman Oaks

State

CA

Zip Code

91401-5928

FEC ID number of contributing
federal political committee.

C

Name of Employer
LA Valley College

Occupation

College Teacher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.80942

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Richard S. Roth

Mailing Address 984 Bloomfield Ave # A

City

West Caldwell

State

NJ

Zip Code

07006-7108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.80949

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Susan S. Ruch

Mailing Address 5 Cuesta Ln

City

Santa Fe

State

NM

Zip Code

87508-8331

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Ranching, Real Estate Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80952

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Michael Russell

Mailing Address 1515 Harbour View Dr

City

Kill Devil HI

State

NC

Zip Code

27948-8651

FEC ID number of contributing
federal political committee.

C

Name of Employer
University Health Systems
East

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80965

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Mark W. Rutherford

Mailing Address 151 N Delaware St Ste 1900

City

Indianapolis

State

IN

Zip Code

46204-2505

FEC ID number of contributing
federal political committee.

C

Name of Employer
Thrasher Buschmann Griffi-
th Voelkel

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80967

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mary Ruwart

Mailing Address 109 Latigo Dr

City

Burnet

State

TX

Zip Code

78611-5921

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80969

Amount of Each Receipt this Period

25.00

Contribution

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Dan L. Rycroft

Mailing Address 1658 Palau Pl

City

Costa Mesa

State

CA

Zip Code

92626-3716

FEC ID number of contributing
federal political committee.

C

Name of Employer
BP Chemicals

Occupation

Facility Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.80971

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John A. Salvette

Mailing Address 2016 Devonshire Rd

City

Ann Arbor

State

MI

Zip Code

48104-4058

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hayes Lemmerz Internatio-
nal

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.80983

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Brian Sasso

Mailing Address 22526 Nature Creek Cir

City

Frankfort

State

IL

Zip Code

60423-9213

FEC ID number of contributing
federal political committee.

C

Name of Employer
Digestive Diseases Consul-
tants

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.80993

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1080.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Bobby Saucier

Mailing Address 187 Inside Rd

City

Picayune

State

MS

Zip Code

39466-7582

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alliance Laser, Inc

Occupation

Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.80995

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Timothy G. Schmitt

Mailing Address 201 Lexington

City

Quincy

State

IL

Zip Code

62305-0916

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.81015

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Robert Schmucker

Mailing Address 116 Deer Track Ct

City

Warner Robins

State

GA

Zip Code

31088-2861

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.81018

Amount of Each Receipt this Period

1000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Steven Schoch

Mailing Address 974 Bluebonnet Dr

City

Sunnyvale

State

CA

Zip Code

94086-6756

FEC ID number of contributing
federal political committee.

C

Name of Employer
StarNet Communications Co-
rp

Occupation

Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81022

Amount of Each Receipt this Period

45.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Rick Secula

Mailing Address 8802 Thorntree Dr

City

Grosse Ile

State

MI

Zip Code

48138-1531

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ford Motor Company

Occupation

Millwright

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81055

Amount of Each Receipt this Period

25.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Mark T. Shay

Mailing Address 4033 Yorktown Dr

City

Marcus Hook

State

PA

Zip Code

19061-2458

FEC ID number of contributing
federal political committee.

C

Name of Employer
EDU, Inc.

Occupation

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.81092

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Kevin Shea

Mailing Address 21 Hollandale Ln Apt M

City

Clifton Park

State

NY

Zip Code

12065-5257

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riverview Orchards

Occupation

Farm Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.81093

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Daniel H. Sheard

Mailing Address 920 W Studebaker Ave

City

Amarillo

State

TX

Zip Code

79108-5026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.81094

Amount of Each Receipt this Period

113.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Thomas J. Shepard

Mailing Address 3378 Black Willow Trl

City

Deland

State

FL

Zip Code

32724-3431

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.81099

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

413.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Robert Shuford

Mailing Address 6 Whartons Way

City

Hampton

State

VA

Zip Code

23669-1094

FEC ID number of contributing
federal political committee.

C

Name of Employer
Old Point National Bank

Occupation

Information Systems banki

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81112

Amount of Each Receipt this Period

85.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Robban A. Sica

Mailing Address 37 Lakewood Dr

City

Trumbull

State

CT

Zip Code

06611-2446

FEC ID number of contributing
federal political committee.

C

Name of Employer
Center for the Healing Ar-
t, PC

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81115

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Jeffrey S. Skinner

Mailing Address PO Box 7007

City

Northridge

State

CA

Zip Code

91327-7007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Prism Management Company,
Inc.

Occupation

Consulting Actuary/Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81135

Amount of Each Receipt this Period

75.00

Contribution

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Lloyd E. Smith

Mailing Address 21 Franklin Ave

City

Oswego

State

NY

Zip Code

13126-1755

FEC ID number of contributing
federal political committee.

C

Name of Employer
HYCO Tunnel & Sewer Co.

Occupation

Land Speculator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	0	9

Transaction ID: SA11AI.81164

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Clifford B. Sondock

Mailing Address 6 Crane Rd

City

Huntington

State

NY

Zip Code

11743-1733

FEC ID number of contributing
federal political committee.

C

Name of Employer
Spiegel Assoc.

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	9

Transaction ID: SA11AI.81186

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Scott Spencer

Mailing Address 3715 Yolando Rd

City

Baltimore

State

MD

Zip Code

21218-2042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Johns Hopkins University

Occupation

Programmer/Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	9

Transaction ID: SA11AI.81200

Amount of Each Receipt this Period

85.00

Contribution

SUBTOTAL of Receipts This Page (optional)

285.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Cisse Spragins

Mailing Address 3425 Gladstone Blvd

City

Kansas City

State

MO

Zip Code

64123-1112

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rockwell Lab Ltd.

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81211

Amount of Each Receipt this Period

1000.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John C. Sproul

Mailing Address 397 Raines Park

City

Rochester

State

NY

Zip Code

14613-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81214

Amount of Each Receipt this Period

20.00

Contribution

C.

Full Name (Last, First, Middle Initial)

John C. Sproul

Mailing Address 397 Raines Park

City

Rochester

State

NY

Zip Code

14613-1118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81215

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Aaron Starr

Mailing Address 4048 Tucson St

City

Simi Valley

State

CA

Zip Code

93063-1144

FEC ID number of contributing
federal political committee.

C

Name of Employer
Haas Automation, Inc.

Occupation
Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81221

Amount of Each Receipt this Period

10.00

Contribution

B.

Full Name (Last, First, Middle Initial)

David Steck

Mailing Address 9650 Mill Field Rd

City

Columbia

State

SC

Zip Code

29223-7107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Alpine Sales, Inc.

Occupation
Small Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.81224

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Craig Stephens

Mailing Address 1008 Cherry Bud Dr

City

Columbus

State

OH

Zip Code

43228-5759

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardinal Health

Occupation
cover-taxed peon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81231

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Alfonzie Stepney

Mailing Address 18100 Mammoth Cave Blvd

City

Pflugerville

State

TX

Zip Code

78660-5293

FEC ID number of contributing
federal political committee.

C

Name of Employer
Texas Commission on Envir-
onmental Qual

Occupation

Air Permit Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.81235

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John S. Stewart

Mailing Address 855 Bryn Mawr Dr

City

Columbus

State

OH

Zip Code

43230-3840

FEC ID number of contributing
federal political committee.

C

Name of Employer
TranInternational

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81241

Amount of Each Receipt this Period

45.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Scott A. Stewart

Mailing Address 8401 E Appomattox St

City

Tucson

State

AZ

Zip Code

85710-2922

FEC ID number of contributing
federal political committee.

C

Name of Employer
Raytheon

Occupation

Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 8 / 2 0 0 9

Transaction ID: SA11AI.81242

Amount of Each Receipt this Period

75.00

Contribution

SUBTOTAL of Receipts This Page (optional)

370.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

James A. Strohm

Mailing Address 7655 N Fm 620 Apt 336

City

Austin

State

TX

Zip Code

78726-4515

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.81260

Amount of Each Receipt this Period

250.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John Sturgeon

Mailing Address 315 Roane St

City

Charleston

State

WV

Zip Code

25302-2122

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81271

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Robert Sullentrop

Mailing Address 140 Hunters Rdg

City

Saint Charles

State

MO

Zip Code

63301-0427

FEC ID number of contributing
federal political committee.

C

Name of Employer
FrontRangeSystems

Occupation

Computer Specialist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81273

Amount of Each Receipt this Period

20.00

Contribution

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Timothy J. Swenson

Mailing Address 210 Vine St
PO Box 146City State Zip Code
Arnegard ND 58835-0146FEC ID number of contributing
federal political committee.

C

Name of Employer
Wilmington Lutheran ChurchOccupation
Pastor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	9

Transaction ID: SA11AI.81290

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Charles Sybesma

Mailing Address 5335 W Grove Ct

City State Zip Code
Visalia CA 93291-7900FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	9

Transaction ID: SA11AI.81297

Amount of Each Receipt this Period

250.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Randy Szabla

Mailing Address 32034 W 13 Mile Rd

City State Zip Code
Farmington Hills MI 48334-2000FEC ID number of contributing
federal political committee.

C

Name of Employer
Wayne State UniversityOccupation
Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	1	/	2	0	0	9

Transaction ID: SA11AI.81302

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Harold M. Taylor

Mailing Address 2640 Elise Dr

City

Hernando

State

MS

Zip Code

38632-6759

FEC ID number of contributing
federal political committee.

C

Name of Employer
Knox Painting Company

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81319

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John M. Taylor, MD

Mailing Address 1 Scenic Dr Unit 1110

City

Highlands

State

NJ

Zip Code

07732-1321

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Samra Group

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81326

Amount of Each Receipt this Period

85.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Charles D. Test

Mailing Address 2710 2nd Ave S

City

Minneapolis

State

MN

Zip Code

55408-1710

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Landlord

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81328

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

John Thompson

Mailing Address 9308 Russell Ave S

City

Minneapolis

State

MN

Zip Code

55431-2430

FEC ID number of contributing
federal political committee.

C

Name of Employer
Agene Systems

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81340

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Richard H. Timberlake

Mailing Address 2535 Rossmere St

City

Colorado Springs

State

CO

Zip Code

80919-4869

FEC ID number of contributing
federal political committee.

C

Name of Employer
Compaq

Occupation
IT Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81353

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

James L. Tobin

Mailing Address 1822 Home Ave

City

Berwyn

State

IL

Zip Code

60402-3080

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elmhurst College

Occupation
Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.81359

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

James L. Tobin

Mailing Address 1822 Home Ave

City

Berwyn

State

IL

Zip Code

60402-3080

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elmhurst College

Occupation
Education

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81360

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

John Travers

Mailing Address PO Box 181

City

Telford

State

PA

Zip Code

18969-0181

FEC ID number of contributing
federal political committee.

C

Name of Employer
Johnson & Johnson

Occupation
Researcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.81375

Amount of Each Receipt this Period

250.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Arnold Trembley

Mailing Address 12066 Charter House Ln Apt E

City

Saint Louis

State

MO

Zip Code

63146-5279

FEC ID number of contributing
federal political committee.

C

Name of Employer
MasterCard International

Occupation
Senior Software Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81376

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Catherine G. Tripp

Mailing Address 89 Martha Ave

City

San Francisco

State

CA

Zip Code

94131-2849

FEC ID number of contributing
federal political committee.

C

Name of Employer
FiQuest, Inc.

Occupation

Mortgage Broker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81378

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Larimore O. Trippet

Mailing Address 10514 Rue D Flore

City

Reno

State

NV

Zip Code

89511-4338

FEC ID number of contributing
federal political committee.

C

Name of Employer
Prof. Financial Advisors

Occupation

Financial Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81379

Amount of Each Receipt this Period

35.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Gregory D. Troxel

Mailing Address PO Box 225

City

Stow

State

MA

Zip Code

01775-0225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Verizon

Occupation

Scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81383

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

115.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Roy C. Turnbull

Mailing Address 4912 Royal Cove Dr

City

Shelby Township

State

MI

Zip Code

48316-1503

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRW Vehicle Safety Systems

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81389

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Sue Velie

Mailing Address 2620 E 150 N

City

Lagrange

State

IN

Zip Code

46761-9694

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jeffrey L. Bssett

Occupation
Dental Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81436

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

James Vogel

Mailing Address 231 S Villa Ave Apt 2A

City

Villa Park

State

IL

Zip Code

60181-2941

FEC ID number of contributing
federal political committee.

C

Name of Employer
Inflight Express

Occupation
Dispatcher

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81448

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

James S. Voris

Mailing Address 20 Warren Manor Ct

City

Cockeysville

State

MD

Zip Code

21030-2741

FEC ID number of contributing
federal political committee.

C

Name of Employer
Aether Systems, Inc

Occupation

Software Developer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81449

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Arch Wakefield

Mailing Address 3047 Point Clear Dr

City

Tega Cay

State

SC

Zip Code

29708-8542

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81463

Amount of Each Receipt this Period

75.00

Contribution

C.

Full Name (Last, First, Middle Initial)

James C. Waldron

Mailing Address 1505 Georgia Ct Apt 202

City

Naperville

State

IL

Zip Code

60540-5061

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81467

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

215.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Anthony D. Ward

Mailing Address 3262 NE 88th Ave

City

Portland

State

OR

Zip Code

97220-5253

FEC ID number of contributing
federal political committee.

C

Name of Employer
Multnowah County

Occupation
Librarian

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81476

Amount of Each Receipt this Period

30.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Cary D. Warner

Mailing Address 12167 Nottingham Ln Apt B

City

Bridgeton

State

MO

Zip Code

63044-4024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Missouri Air National Guard

Occupation
Fueler

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81479

Amount of Each Receipt this Period

100.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Wendell T Webber

Mailing Address 48 College St

City

Old Saybrook

State

CT

Zip Code

06475-2527

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wendell T Webber Photographer

Occupation
Photographer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81493

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

John C. Wendell

Mailing Address 2834 Ventura Ave

City

Santa Rosa

State

CA

Zip Code

95403-2227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Icore International

Occupation
Machinist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.81507

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

David A. Wiester

Mailing Address 4124 Longfellow Ave

City

Minneapolis

State

MN

Zip Code

55407-3439

FEC ID number of contributing
federal political committee.

C

Name of Employer
AmEx Financial Advisors

Occupation
warehouse lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81539

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Brett E. Wilhelm

Mailing Address PO Box 940

City

Freeland

State

WA

Zip Code

98249-0940

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tru G. Wilhelm, Inc.

Occupation
Corp. Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.81543

Amount of Each Receipt this Period

30.00

Contribution

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

John D. Williams

Mailing Address 3 Clover Leaf Ct

City

Savoy

State

IL

Zip Code

61874-9759

FEC ID number of contributing
federal political committee.

C

Name of Employer
U of IL

Occupation
Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81547

Amount of Each Receipt this Period

40.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Morley R. Williams

Mailing Address 7051 Mount Olympus Dr

City

Fallbrook

State

CA

Zip Code

92028-8092

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 1 / 2 0 0 9

Transaction ID: SA11AI.81549

Amount of Each Receipt this Period

50.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Charles W. Wilson

Mailing Address PO Box 454

City

Red Oak

State

IA

Zip Code

51566-0454

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81555

Amount of Each Receipt this Period

50.00

Contribution

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Emil R. Wolanski

Mailing Address 4659 Landchester Rd

City

Cleveland

State

OH

Zip Code

44109-4571

FEC ID number of contributing
federal political committee.

C

Name of Employer
Deaconess Hospital

Occupation

Shipping & Receiving

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81575

Amount of Each Receipt this Period

35.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Ron Woodward

Mailing Address 107 Nansemond Turn

City

Yorktown

State

VA

Zip Code

23693-2731

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81588

Amount of Each Receipt this Period

30.00

Contribution

C.

Full Name (Last, First, Middle Initial)

Wesley Wornom

Mailing Address 8 Stolen Will Ct

City

Stafford

State

VA

Zip Code

22554-8516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81591

Amount of Each Receipt this Period

100.00

Contribution

SUBTOTAL of Receipts This Page (optional)

165.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

George F. Wright

Mailing Address Parkside Commons, Apt #009

City State Zip Code
Meadville PA 16335

FEC ID number of contributing
federal political committee.

C

Name of Employer
Crawford County Libertari-
an Party

Occupation
Secretary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.81604

Amount of Each Receipt this Period

100.00

Contribution

B.

Full Name (Last, First, Middle Initial)

R. Lee Wrights

Mailing Address 6475 Lawson Ln

City State Zip Code
Tobaccoville NC 27050-9794

FEC ID number of contributing
federal political committee.

C

Name of Employer
Free-Market.net

Occupation
Writer/Editor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.81611

Amount of Each Receipt this Period

1000.00

Contribution

C.

Full Name (Last, First, Middle Initial)

David A. Young

Mailing Address 2825 S Washington Ave Unit 657

City State Zip Code
Titusville FL 32780-5060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Boeing

Occupation
Technical Writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.81628

Amount of Each Receipt this Period

35.00

Contribution

SUBTOTAL of Receipts This Page (optional)

1135.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 152

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Gary Zander

Mailing Address 102 Back Bone Hill Rd

City

Clarksburg

State

NJ

Zip Code

08510-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer
IFF

Occupation
scientist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.81635

Amount of Each Receipt this Period

50.00

Contribution

B.

Full Name (Last, First, Middle Initial)

Richard P. Zizan

Mailing Address PO Box 143

City

Rillton

State

PA

Zip Code

15678-0143

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pineer Mfg.Co.

Occupation
Mech. Engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.81645

Amount of Each Receipt this Period

500.00

Contribution

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

33266.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 152

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

STROHM FOR CONGRESS

Mailing Address 7655 RM 620 N #336

City

AUSTIN

State

TX

Zip Code

78726

FEC ID number of contributing
federal political committee.

C

C00420083

Name of Employer

Occupation

Receipt For:

☐ ☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 6 / 2 0 0 9

Transaction ID: SA11C.81846

Amount of Each Receipt this Period

250.00

Contribution

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

250.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 109 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Advanced Mailing Services, LLC	Transaction ID: SB21B.81686 Date of Disbursement																				
Mailing Address 14970 Farm Creek Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	0	9												
City Woodbridge State VA Zip Code 22191-3550	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non Candidate Party Mailing Serv Candidate Name	<table border="1"> <tr> <td colspan="10">1194.52</td> </tr> </table>	1194.52																			
1194.52																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	003 Category/ Type																				
B. Full Name (Last, First, Middle Initial) Advanced Mailing Services, LLC	Transaction ID: SB21B.81786 Date of Disbursement																				
Mailing Address 14970 Farm Creek Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	0	9												
City Woodbridge State VA Zip Code 22191-3550	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non Candidate Party Mailing Serv Candidate Name	<table border="1"> <tr> <td colspan="10">2148.07</td> </tr> </table>	2148.07																			
2148.07																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	003 Category/ Type																				
C. Full Name (Last, First, Middle Initial) Advanced Mailing Services, LLC	Transaction ID: SB21B.81687 Date of Disbursement																				
Mailing Address 14970 Farm Creek Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Woodbridge State VA Zip Code 22191-3550	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non Candidate Party Mailing Serv Candidate Name	<table border="1"> <tr> <td colspan="10">1515.17</td> </tr> </table>	1515.17																			
1515.17																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	003 Category/ Type																				

SUBTOTAL of Disbursements This Page (optional)

4857.76

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 110 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
American National Insurance Co.

Mailing Address P. O. Box 1830 - Pension Dept.

City Galvison State TX Zip Code 77550-1830

Purpose of Disbursement
LNC 401K Annual Maint Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81688

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

1450.00

B.

Full Name (Last, First, Middle Initial)
American National Insurance Co.

Mailing Address P. O. Box 1830 - Pension Dept.

City Galvison State TX Zip Code 77550-1830

Purpose of Disbursement
401k Co. Match and Employee Contributions

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81747

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

1314.36

C.

Full Name (Last, First, Middle Initial)
Arcade Press

Mailing Address 5436 Harford Rd.

City Baltimore State MD Zip Code 21214-2292

Purpose of Disbursement
Non Candidate Party Printing Serv

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81787

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

730.00

SUBTOTAL of Disbursements This Page (optional)

3494.36

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Authorize.net

Mailing Address 915 South 500 East Suite 200

City
American Fork

State
UT

Zip Code
84003-0000

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.81741

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

22.50

B.

Full Name (Last, First, Middle Initial)

B & B Duplicators

Mailing Address 818 18th Street NW LL15

City
Washington

State
DC

Zip Code
20006-0000

Purpose of Disbursement
Non Candidate Party Printing Serv

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.81789

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

380.70

C.

Full Name (Last, First, Middle Initial)

Robert C. Benedict

Mailing Address 3816 S. Lamar Blvd.
Apt. 3822

City
Austin

State
TX

Zip Code
78704-0000

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.81669

Date of Disbursement

08 / 05 / 2009

Amount of Each Disbursement this Period

1551.97

SUBTOTAL of Disbursements This Page (optional)

1955.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 112 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Robert C. Benedict

Mailing Address 3816 S. Lamar Blvd.
Apt. 3822

City Austin State TX Zip Code 78704-0000

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81670

Date of Disbursement

08 / 19 / 2009

Amount of Each Disbursement this Period

1551.96

B.

Full Name (Last, First, Middle Initial)

BentleyForbes Watergate LLC

Mailing Address PO Box 73378

City Cleveland State OH Zip Code 44193-3378

Purpose of Disbursement
Office Rent, Tax, Maint & Utilities Aug09

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81691

Date of Disbursement

08 / 03 / 2009

Amount of Each Disbursement this Period

10928.89

C.

Full Name (Last, First, Middle Initial)

BentleyForbes Watergate LLC

Mailing Address PO Box 73378

City Cleveland State OH Zip Code 44193-3378

Purpose of Disbursement
Office Rent, Tax, Maint & Utilities Sept 09

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81692

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

10928.89

SUBTOTAL of Disbursements This Page (optional)

23409.74

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 113 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Broadway Premium Funding	Transaction ID: SB21B.81693 Date of Disbursement																				
Mailing Address PO Box 66468	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	7		2	0	0	9												
City Chicago State IL Zip Code 60666-0468	Amount of Each Disbursement this Period																				
Purpose of Disbursement D and O Insurance Candidate Name	<table border="1"> <tr> <td colspan="10">815.99</td> </tr> </table>	815.99																			
815.99																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Louise Calise	Transaction ID: SB21B.81671 Date of Disbursement																				
Mailing Address 6802 Dante Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	5		2	0	0	9												
City Springfield State VA Zip Code 22152-3328	Amount of Each Disbursement this Period																				
Purpose of Disbursement Employee Net Pay Candidate Name	<table border="1"> <tr> <td colspan="10">1348.80</td> </tr> </table>	1348.80																			
1348.80																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Louise Calise	Transaction ID: SB21B.81672 Date of Disbursement																				
Mailing Address 6802 Dante Ct	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	9		2	0	0	9												
City Springfield State VA Zip Code 22152-3328	Amount of Each Disbursement this Period																				
Purpose of Disbursement Employee Net Pay Candidate Name	<table border="1"> <tr> <td colspan="10">1361.26</td> </tr> </table>	1361.26																			
1361.26																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3526.05

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 114 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Carefirst CapitalCare (Robert)

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement
Employee Health Insurance

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81694

Date of Disbursement

08 / 27 / 2009

Amount of Each Disbursement this Period

112.00

B.

Full Name (Last, First, Middle Initial)
Christy Carmody

Mailing Address 1751 Camarillo Drive

City N. Las Vegas State NV Zip Code 89031-0000

Purpose of Disbursement
Non Candidate Party Editing and Graphics

Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81790

Date of Disbursement

08 / 13 / 2009

Amount of Each Disbursement this Period

150.00

C.

Full Name (Last, First, Middle Initial)
Commonwealth Digital Office Solutions

Mailing Address 21205 Ridgetop Circle

City Sterling State VA Zip Code 20166-6501

Purpose of Disbursement
Copier Maint and Supplies

Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81793

Date of Disbursement

08 / 13 / 2009

Amount of Each Disbursement this Period

153.98

SUBTOTAL of Disbursements This Page (optional)

415.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 115 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions	Transaction ID: SB21B.81696 Date of Disbursement								
Mailing Address 21205 Ridgetop Circle	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 9</div> </div>								
<table border="1"> <tr> <td>City Sterling</td> <td>State VA</td> <td>Zip Code 20166-6501</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Copier Maint and Supplies</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Sterling	State VA	Zip Code 20166-6501	Purpose of Disbursement Copier Maint and Supplies		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>205.07</div>
City Sterling	State VA	Zip Code 20166-6501							
Purpose of Disbursement Copier Maint and Supplies		<div>001</div> Category/ Type							
Candidate Name									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
B. Full Name (Last, First, Middle Initial) DC Office of Tax & Revenue	Transaction ID: SB21B.81749 Date of Disbursement								
Mailing Address 941 North Capitol St, NE 6th Flr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 4 / 2 0 0 9</div> </div>								
<table border="1"> <tr> <td>City Washington</td> <td>State DC</td> <td>Zip Code 20002-0000</td> </tr> <tr> <td colspan="2">Purpose of Disbursement DC - Admin. Funding Assessment</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Washington	State DC	Zip Code 20002-0000	Purpose of Disbursement DC - Admin. Funding Assessment		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>5.24</div>
City Washington	State DC	Zip Code 20002-0000							
Purpose of Disbursement DC - Admin. Funding Assessment		<div>001</div> Category/ Type							
Candidate Name									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								
C. Full Name (Last, First, Middle Initial) DC Office of Tax & Revenue	Transaction ID: SB21B.81751 Date of Disbursement								
Mailing Address 941 North Capitol St, NE 6th Flr	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 4 / 2 0 0 9</div> </div>								
<table border="1"> <tr> <td>City Washington</td> <td>State DC</td> <td>Zip Code 20002-0000</td> </tr> <tr> <td colspan="2">Purpose of Disbursement DC - Unemployment Company</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Washington	State DC	Zip Code 20002-0000	Purpose of Disbursement DC - Unemployment Company		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>34.03</div>
City Washington	State DC	Zip Code 20002-0000							
Purpose of Disbursement DC - Unemployment Company		<div>001</div> Category/ Type							
Candidate Name									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼								

SUBTOTAL of Disbursements This Page (optional)

244.34

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) DC Office of Tax & Revenue	Transaction ID: SB21B.81753 Date of Disbursement																				
Mailing Address 941 North Capitol St, NE 6th Flr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	0	9												
<table border="1"> <tr> <td>City Washington</td> <td>State DC</td> <td>Zip Code 20002-0000</td> </tr> <tr> <td colspan="2">Purpose of Disbursement DC - Withholding</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Washington	State DC	Zip Code 20002-0000	Purpose of Disbursement DC - Withholding		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>60.00</div>												
City Washington	State DC	Zip Code 20002-0000																			
Purpose of Disbursement DC - Withholding		<div>001</div> Category/ Type																			
Candidate Name																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:																
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
B. Full Name (Last, First, Middle Initial) DC Office of Tax & Revenue	Transaction ID: SB21B.81748 Date of Disbursement																				
Mailing Address 941 North Capitol St, NE 6th Flr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	0	9												
<table border="1"> <tr> <td>City Washington</td> <td>State DC</td> <td>Zip Code 20002-0000</td> </tr> <tr> <td colspan="2">Purpose of Disbursement DC - Admin. Funding Assessment</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Washington	State DC	Zip Code 20002-0000	Purpose of Disbursement DC - Admin. Funding Assessment		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>3.84</div>												
City Washington	State DC	Zip Code 20002-0000																			
Purpose of Disbursement DC - Admin. Funding Assessment		<div>001</div> Category/ Type																			
Candidate Name																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:																
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					
C. Full Name (Last, First, Middle Initial) DC Office of Tax & Revenue	Transaction ID: SB21B.81750 Date of Disbursement																				
Mailing Address 941 North Capitol St, NE 6th Flr	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	0	9												
<table border="1"> <tr> <td>City Washington</td> <td>State DC</td> <td>Zip Code 20002-0000</td> </tr> <tr> <td colspan="2">Purpose of Disbursement DC - Unemployment Company</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Washington	State DC	Zip Code 20002-0000	Purpose of Disbursement DC - Unemployment Company		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>25.00</div>												
City Washington	State DC	Zip Code 20002-0000																			
Purpose of Disbursement DC - Unemployment Company		<div>001</div> Category/ Type																			
Candidate Name																					
<table border="1"> <tr> <td>Office Sought:</td> <td>Disbursement For:</td> </tr> <tr> <td> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </td> <td> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </td> </tr> <tr> <td>State: District:</td> <td></td> </tr> </table>	Office Sought:	Disbursement For:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:																
Office Sought:	Disbursement For:																				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
State: District:																					

SUBTOTAL of Disbursements This Page (optional) ►

88.84

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DC Office of Tax & Revenue

Mailing Address 941 North Capitol St, NE 6th Flr

City Washington State DC Zip Code 20002-0000

Purpose of Disbursement
DC - Withholding

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.81752

Date of Disbursement

08 / 18 / 2009

Amount of Each Disbursement this Period

60.00

B.

Full Name (Last, First, Middle Initial)

De Lage Landen Financial

Mailing Address PO Box 41601

City Philadelphia State PA Zip Code 19101-1601

Purpose of Disbursement
Copier Lease

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.81697

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

533.07

C.

Full Name (Last, First, Middle Initial)

Susan M Dickson

Mailing Address 3410 Vineland Place

City Dumfries State VA Zip Code 22026-0000

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.81673

Date of Disbursement

08 / 05 / 2009

Amount of Each Disbursement this Period

967.85

SUBTOTAL of Disbursements This Page (optional) ►

1560.92

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 118 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Susan M Dickson	Transaction ID: SB21B.81674 Date of Disbursement																				
Mailing Address 3410 Vineland Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	9		2	0	0	9												
City Dumfries State VA Zip Code 22026-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Employee Net Pay Candidate Name	<table border="1"> <tr> <td colspan="10">995.79</td> </tr> </table>	995.79																			
995.79																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) DirectLine Technologies, Inc.	Transaction ID: SB21B.81794 Date of Disbursement																				
Mailing Address 1600 N. Carpenter Rd. #D	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	0	9												
City Modesto State CA Zip Code 95351-1145	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non Candidate Party Phonebank Service Candidate Name	<table border="1"> <tr> <td colspan="10">4000.00</td> </tr> </table>	4000.00																			
4000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) DirectMail.com	Transaction ID: SB21B.81797 Date of Disbursement																				
Mailing Address 5511 Ketch Road Attn: Beverly Kalbaugh	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	0	9												
City Prince Frederick State MD Zip Code 20678-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non Candidate Party Mailing Serv Candidate Name	<table border="1"> <tr> <td colspan="10">3329.51</td> </tr> </table>	3329.51																			
3329.51																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

8325.30

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DirectMail.com

Mailing Address 5511 Ketch Road
Attn: Beverly Kalbaugh

City Prince Frederick State MD Zip Code 20678-0000

Purpose of Disbursement
Non Candidate Party Mailing Serv

Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: SB21B.81798

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

4967.23

B.

Full Name (Last, First, Middle Initial)

Paula Edwards

Mailing Address 1200 G Street, N.W. Suite 800

City Washington State DC Zip Code 20005-0000

Purpose of Disbursement
Fec Filing and Amendments

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: SB21B.81666

Date of Disbursement

08 / 03 / 2009

Amount of Each Disbursement this Period

1250.00

C.

Full Name (Last, First, Middle Initial)

Donald E. Ferguson

Mailing Address 101 Skyhill Rd. #203

City Alexandria State VA Zip Code 22313-6473

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼

Transaction ID: SB21B.81676

Date of Disbursement

08 / 05 / 2009

Amount of Each Disbursement this Period

1347.24

SUBTOTAL of Disbursements This Page (optional)

7564.47

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Donald E. Ferguson	Transaction ID: SB21B.81675 Date of Disbursement																				
Mailing Address 101 Skyhill Rd. #203	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	9		2	0	0	9												
City Alexandria State VA Zip Code 22313-6473	Amount of Each Disbursement this Period																				
Purpose of Disbursement Employee Net Pay Candidate Name	<table border="1"> <tr> <td colspan="10">1347.24</td> </tr> </table>	1347.24																			
1347.24																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	Transaction ID: SB21B.81755 Date of Disbursement																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	0	9												
City St. Louis State MO Zip Code 63197-0030	Amount of Each Disbursement this Period																				
Purpose of Disbursement Federal Unemployment Candidate Name	<table border="1"> <tr> <td colspan="10">15.71</td> </tr> </table>	15.71																			
15.71																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	Transaction ID: SB21B.81757 Date of Disbursement																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	0	9												
City St. Louis State MO Zip Code 63197-0030	Amount of Each Disbursement this Period																				
Purpose of Disbursement Federal Withholding Candidate Name	<table border="1"> <tr> <td colspan="10">1378.00</td> </tr> </table>	1378.00																			
1378.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2740.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 121 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Medicare Company

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.81759

Date of Disbursement

08 / 04 / 2009

Amount of Each Disbursement this Period

190.00

B. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Medicare Employee

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.81761

Date of Disbursement

08 / 04 / 2009

Amount of Each Disbursement this Period

190.00

C. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Social Security Company

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.81765

Date of Disbursement

08 / 04 / 2009

Amount of Each Disbursement this Period

812.41

SUBTOTAL of Disbursements This Page (optional)

1192.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	Transaction ID: SB21B.81767 Date of Disbursement																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	0	9												
City St. Louis State MO Zip Code 63197-0030	Amount of Each Disbursement this Period																				
Purpose of Disbursement Social Security Employee Candidate Name	<table border="1"> <tr> <td>812.41</td> </tr> </table>	812.41																			
812.41																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	Transaction ID: SB21B.81754 Date of Disbursement																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	0	9												
City St. Louis State MO Zip Code 63197-0030	Amount of Each Disbursement this Period																				
Purpose of Disbursement Federal Unemployment Candidate Name	<table border="1"> <tr> <td>15.38</td> </tr> </table>	15.38																			
15.38																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	Transaction ID: SB21B.81756 Date of Disbursement																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	0	9												
City St. Louis State MO Zip Code 63197-0030	Amount of Each Disbursement this Period																				
Purpose of Disbursement Federal Withholding Candidate Name	<table border="1"> <tr> <td>1395.00</td> </tr> </table>	1395.00																			
1395.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2222.79

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Medicare Company

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.81758

Date of Disbursement

08 / 18 / 2009

Amount of Each Disbursement this Period

185.42

B. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Medicare Employee

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.81760

Date of Disbursement

08 / 18 / 2009

Amount of Each Disbursement this Period

185.42

C. Full Name (Last, First, Middle Initial)
Financial Agent Federal Tax Deposit

Mailing Address PO Box 970030

City State Zip Code
St. Louis MO 63197-0030

Purpose of Disbursement
Social Security Company

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.81764

Date of Disbursement

08 / 18 / 2009

Amount of Each Disbursement this Period

792.81

SUBTOTAL of Disbursements This Page (optional)

1163.65

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 124 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit	Transaction ID: SB21B.81766 Date of Disbursement																				
Mailing Address PO Box 970030	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	0	9												
<table border="1"> <tr> <td>City St. Louis</td> <td>State MO</td> <td>Zip Code 63197-0030</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Social Security Employee</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City St. Louis	State MO	Zip Code 63197-0030	Purpose of Disbursement Social Security Employee		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>792.81</div>												
City St. Louis	State MO	Zip Code 63197-0030																			
Purpose of Disbursement Social Security Employee		<div>001</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) FP Mailing Solutions	Transaction ID: SB21B.81742 Date of Disbursement																				
Mailing Address Dept 4272	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
<table border="1"> <tr> <td>City Carol Stream</td> <td>State IL</td> <td>Zip Code 60122-4272</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Postage & Meter Resets</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Carol Stream	State IL	Zip Code 60122-4272	Purpose of Disbursement Postage & Meter Resets		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>500.00</div>												
City Carol Stream	State IL	Zip Code 60122-4272																			
Purpose of Disbursement Postage & Meter Resets		<div>001</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Frye & Wolcott, CPAs	Transaction ID: SB21B.81701 Date of Disbursement																				
Mailing Address 9161 Liberia Avenue, Suite 304	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
<table border="1"> <tr> <td>City Manassas</td> <td>State VA</td> <td>Zip Code 20110-0000</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Accounting Services</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Manassas	State VA	Zip Code 20110-0000	Purpose of Disbursement Accounting Services		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>3000.00</div>												
City Manassas	State VA	Zip Code 20110-0000																			
Purpose of Disbursement Accounting Services		<div>001</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4292.81

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 125 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Great American Leasing	Transaction ID: SB21B.81801 Date of Disbursement																				
Mailing Address PO Box 660831	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Dallas State TX Zip Code 75266-0831	Amount of Each Disbursement this Period																				
Purpose of Disbursement Postage Meter Lease Candidate Name	<table border="1"> <tr> <td colspan="10">215.61</td> </tr> </table>	215.61																			
215.61																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Casey T Hansen	Transaction ID: SB21B.81678 Date of Disbursement																				
Mailing Address 1445 Ogden St. NW #212	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	5		2	0	0	9												
City Washington State DC Zip Code 20010-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Employee Net Pay Candidate Name	<table border="1"> <tr> <td colspan="10">1015.79</td> </tr> </table>	1015.79																			
1015.79																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Casey T Hansen	Transaction ID: SB21B.81677 Date of Disbursement																				
Mailing Address 1445 Ogden St. NW #212	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	9		2	0	0	9												
City Washington State DC Zip Code 20010-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Employee Net Pay Candidate Name	<table border="1"> <tr> <td colspan="10">1015.79</td> </tr> </table>	1015.79																			
1015.79																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2247.19

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Ian W. Hosking	Transaction ID: SB21B.81679 Date of Disbursement																				
Mailing Address 4537 Lowell Street, NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	5		2	0	0	9												
City Washington State DC Zip Code 20016-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Employee Net Pay Candidate Name	<table border="1"> <tr> <td colspan="10">37.13</td> </tr> </table>	37.13																			
37.13																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Joe Ragan's	Transaction ID: SB21B.81803 Date of Disbursement																				
Mailing Address PO Box 125	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	0	9												
City Springfield State VA Zip Code 22150-0125	Amount of Each Disbursement this Period																				
Purpose of Disbursement Office Supplies Candidate Name	<table border="1"> <tr> <td colspan="10">411.99</td> </tr> </table>	411.99																			
411.99																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Joe Ragan's	Transaction ID: SB21B.81804 Date of Disbursement																				
Mailing Address PO Box 125	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Springfield State VA Zip Code 22150-0125	Amount of Each Disbursement this Period																				
Purpose of Disbursement Office Supplies Candidate Name	<table border="1"> <tr> <td colspan="10">162.64</td> </tr> </table>	162.64																			
162.64																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

611.76

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Robert S Kraus

Transaction ID: SB21B.81680

Date of Disbursement

08 / 05 / 2009

Mailing Address 5375 Duke Street
Apt 905

City Alexandria State VA Zip Code 22304-0000

Amount of Each Disbursement this Period

1492.88

Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Robert S Kraus

Transaction ID: SB21B.81681

Date of Disbursement

08 / 19 / 2009

Mailing Address 5375 Duke Street
Apt 905

City Alexandria State VA Zip Code 22304-0000

Amount of Each Disbursement this Period

1492.89

Purpose of Disbursement
Employee Net Pay

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

MAMSI - UnitedHealth (WFG)

Transaction ID: SB21B.81705

Date of Disbursement

08 / 27 / 2009

Mailing Address Dept. CH-10151

City Palatine State IL Zip Code 60055-0151

Amount of Each Disbursement this Period

1089.35

Purpose of Disbursement
Employee Health Insurance

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

4075.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 128 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Meltwater News, Inc.

Mailing Address File # 51042 - Bibby Finc. Serv.

City State Zip Code
Los Angeles CA 90074-1042

Purpose of Disbursement
Media Clipping Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81807

Date of Disbursement

08 / 13 / 2009

Amount of Each Disbursement this Period

1250.00

B.

Full Name (Last, First, Middle Initial)

Meltwater News, Inc.

Mailing Address File # 51042 - Bibby Finc. Serv.

City State Zip Code
Los Angeles CA 90074-1042

Purpose of Disbursement
Media Clipping Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81707

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

1250.00

C.

Full Name (Last, First, Middle Initial)

Mark J. Meranta

Mailing Address 5883 Anthony Dr.

City State Zip Code
Woodbridge VA 22193-0000

Purpose of Disbursement
Employee Net Pay

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81683

Date of Disbursement

08 / 05 / 2009

Amount of Each Disbursement this Period

762.70

SUBTOTAL of Disbursements This Page (optional)

3262.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Mark J. Meranta	Transaction ID: SB21B.81682 Date of Disbursement																				
Mailing Address 5883 Anthony Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	9		2	0	0	9												
City Woodbridge State VA Zip Code 22193-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Employee Net Pay Candidate Name	<table border="1"> <tr> <td colspan="10">415.57</td> </tr> </table>	415.57																			
415.57																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Merchant Services	Transaction ID: SB21B.81743 Date of Disbursement																				
Mailing Address 890 Mountain Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City New Providence State NJ Zip Code 07974-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<table border="1"> <tr> <td colspan="10">614.95</td> </tr> </table>	614.95																			
614.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) National Electronic Type, Inc	Transaction ID: SB21B.81809 Date of Disbursement																				
Mailing Address 2320 S. Kansas Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	0	9												
City Topeka State KS Zip Code 66611-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Non Candidate Party Printing Serv Candidate Name	<table border="1"> <tr> <td colspan="10">1056.06</td> </tr> </table>	1056.06																			
1056.06																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

2086.58

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

National Electronic Type, Inc

Mailing Address 2320 S. Kansas Ave

City
Topeka

State
KS

Zip Code
66611-0000

Purpose of Disbursement
Non Candidate Party Printing Serv

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81811

Date of Disbursement

08 / 13 / 2009

Amount of Each Disbursement this Period

352.45

B.

Full Name (Last, First, Middle Initial)

National Electronic Type, Inc

Mailing Address 2320 S. Kansas Ave

City
Topeka

State
KS

Zip Code
66611-0000

Purpose of Disbursement
Non Candidate Party Printing Serv

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81709

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

444.61

C.

Full Name (Last, First, Middle Initial)

PAETEC - US LEC Corp.

Mailing Address PO Box 1317

City
Buffalo

State
NY

Zip Code
14240-1317

Purpose of Disbursement
Phone and Data Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81812

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

1177.78

SUBTOTAL of Disbursements This Page (optional)

1974.84

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PayPal Merchant Services			Transaction ID: SB21B.81744 Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y															
	0	8		3	1		2	0	0	9															
	Mailing Address 2211 N. First St.																								
	City San Jose	State CA	Zip Code 95131-0000	Amount of Each Disbursement this Period <table border="1"><tr><td colspan="10">386.57</td></tr></table>		386.57																			
386.57																									
Purpose of Disbursement Credit Card Processing Fee		001 Category/ Type																							
Candidate Name																									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
State: District:																									
B.	Full Name (Last, First, Middle Initial) Austin W Petersen			Transaction ID: SB21B.81685 Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	5		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y															
	0	8		0	5		2	0	0	9															
	Mailing Address 309 N. Jordan St. Apt 102																								
	City Alexandria	State VA	Zip Code 22304-0000	Amount of Each Disbursement this Period <table border="1"><tr><td colspan="10">1302.51</td></tr></table>		1302.51																			
1302.51																									
Purpose of Disbursement Employee Net Pay		001 Category/ Type																							
Candidate Name																									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
State: District:																									
C.	Full Name (Last, First, Middle Initial) Austin W Petersen			Transaction ID: SB21B.81684 Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	9		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y															
	0	8		1	9		2	0	0	9															
	Mailing Address 309 N. Jordan St. Apt 102																								
	City Alexandria	State VA	Zip Code 22304-0000	Amount of Each Disbursement this Period <table border="1"><tr><td colspan="10">1331.45</td></tr></table>		1331.45																			
1331.45																									
Purpose of Disbursement Employee Net Pay		001 Category/ Type																							
Candidate Name																									
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
State: District:																									

SUBTOTAL of Disbursements This Page (optional)

3020.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) PNC - Riggs Bank	Transaction ID: SB21B.81745 Date of Disbursement																				
Mailing Address 2600 Virginia Ave NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Washington State DC Zip Code 20037	Amount of Each Disbursement this Period																				
Purpose of Disbursement Bank Service Charges Candidate Name	<table border="1"> <tr> <td colspan="10">140.54</td> </tr> </table>	140.54																			
140.54																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) PNC Master Card	Transaction ID: SB21B.81711 Date of Disbursement																				
Mailing Address PO Box 790350	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City St. Louis State MO Zip Code 63179-0350	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Payment (See Attached Memos) Candidate Name	<table border="1"> <tr> <td colspan="10">5598.79</td> </tr> </table>	5598.79																			
5598.79																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Accurant	Transaction ID: SB21B.81711.0 Date of Disbursement																				
Mailing Address P.O. Box 538358	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Atlanta State GA Zip Code 30353-8358	Amount of Each Disbursement this Period																				
Purpose of Disbursement Address and Phone Verification Serv Candidate Name	<table border="1"> <tr> <td colspan="10">80.63</td> </tr> </table>	80.63																			
80.63																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

5739.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Amazon.com	Transaction ID: SB21B.81711.2 Date of Disbursement
Mailing Address 1200 12th Avenue South #1200	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>08 / 31 / 2009</div> </div>
City State Zip Code Seattle WA 98144-2734	Amount of Each Disbursement this Period <div>31.54</div>
Purpose of Disbursement Office Supplies Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) GoToMyPC.com	Transaction ID: SB21B.81711.5 Date of Disbursement
Mailing Address 5385 Hollister Ave #111	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>08 / 31 / 2009</div> </div>
City State Zip Code Santa barbara CA 93111-0000	Amount of Each Disbursement this Period <div>44.94</div>
Purpose of Disbursement PC Remote Access Service Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Image Media Inc.	Transaction ID: SB21B.81711.6 Date of Disbursement
Mailing Address 39346 US Hwy 19 North	<div> <div><small>M</small> <small>M</small> / <small>D</small> <small>D</small> / <small>Y</small> <small>Y</small> <small>Y</small> <small>Y</small></div> <div>08 / 31 / 2009</div> </div>
City State Zip Code Tarpon Springs FL 34689-3987	Amount of Each Disbursement this Period <div>56.10</div>
Purpose of Disbursement Office Supplies Candidate Name	<div>001</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)	<div>0.00</div>
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Lyris Tech - Sparklist

Mailing Address PO Box 49023

City State Zip Code
San Jose CA 95161-9023

Purpose of Disbursement
Email Marketing Services

Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.81711.7

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

3000.00

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

OnTimeTelecom, LLC.

Mailing Address 235 Apollo Beach Blvd, Suite 307

City State Zip Code
Apollo Beach FL 33572-0000

Purpose of Disbursement
Telemarketing Expense

Candidate Name

003
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.81711.9

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

PNC Master Card

Mailing Address PO Box 790350

City State Zip Code
St. Louis MO 63179-0350

Purpose of Disbursement
Credit Card Finance Charges

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: SB21B.81711.10

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

112.97

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 135 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Rackspace US Inc.	Transaction ID: SB21B.81711.11 Date of Disbursement																				
Mailing Address 9725 Datapoint Dr. #100	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City San Antonio State TX Zip Code 78229-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Website Hosting Service Candidate Name	<table border="1"> <tr> <td colspan="10">649.00</td> </tr> </table>	649.00																			
649.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) Safeway	Transaction ID: SB21B.81711.12 Date of Disbursement																				
Mailing Address 2550 Virginia Ave NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Washington State DC Zip Code 20037-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Office Supplies Candidate Name	<table border="1"> <tr> <td colspan="10">19.36</td> </tr> </table>	19.36																			
19.36																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
C. Full Name (Last, First, Middle Initial) ThePlanet.com	Transaction ID: SB21B.81711.13 Date of Disbursement																				
Mailing Address 1333 N. Stemmons Fwy #110	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Dallas State TX Zip Code 75207-3724	Amount of Each Disbursement this Period																				
Purpose of Disbursement Email Server Hosting Expense Candidate Name	<table border="1"> <tr> <td colspan="10">1148.00</td> </tr> </table>	1148.00																			
1148.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Worldwide Express - DHL	Transaction ID: SB21B.81711.15 Date of Disbursement																				
Mailing Address 1911 North Ft. Myer Dr. Ste 108	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
<table border="1"> <tr> <td>City Arlington</td> <td>State VA</td> <td>Zip Code 22209-0000</td> </tr> <tr> <td colspan="2">Purpose of Disbursement UPS Shipping Services</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Arlington	State VA	Zip Code 22209-0000	Purpose of Disbursement UPS Shipping Services		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>29.74</div>												
City Arlington	State VA	Zip Code 22209-0000																			
Purpose of Disbursement UPS Shipping Services		<div>001</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]																				
B. Full Name (Last, First, Middle Initial) QuickBooks Payroll Service	Transaction ID: SB21B.81763 Date of Disbursement																				
Mailing Address PO Box 30015	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	0	9												
<table border="1"> <tr> <td>City Reno</td> <td>State NV</td> <td>Zip Code 89520-3015</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll Processing Fees</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Reno	State NV	Zip Code 89520-3015	Purpose of Disbursement Payroll Processing Fees		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>103.90</div>												
City Reno	State NV	Zip Code 89520-3015																			
Purpose of Disbursement Payroll Processing Fees		<div>001</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) QuickBooks Payroll Service	Transaction ID: SB21B.81762 Date of Disbursement																				
Mailing Address PO Box 30015	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	0	9												
<table border="1"> <tr> <td>City Reno</td> <td>State NV</td> <td>Zip Code 89520-3015</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Payroll Processing Fees</td> <td rowspan="2"> <div>001</div> Category/ Type </td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Reno	State NV	Zip Code 89520-3015	Purpose of Disbursement Payroll Processing Fees		<div>001</div> Category/ Type	Candidate Name		Amount of Each Disbursement this Period <div>20.62</div>												
City Reno	State NV	Zip Code 89520-3015																			
Purpose of Disbursement Payroll Processing Fees		<div>001</div> Category/ Type																			
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

124.52

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 137 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Renaissance Grand, St. Louis	Transaction ID: SB21B.81732 Date of Disbursement
Mailing Address 800 Washington Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 7 / 2 0 0 9</div> </div>
City State Zip Code St. Louis MO 63101-0000	Amount of Each Disbursement this Period
Purpose of Disbursement Staff Travel - Food and Hotel Candidate Name	<div> <div>3070.59</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Gary Sinawski	Transaction ID: SB21B.81667 Date of Disbursement
Mailing Address 180 Montage St. 25th Floor	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 1 / 2 0 0 9</div> </div>
City State Zip Code Brooklyn NY 11201-3623	Amount of Each Disbursement this Period
Purpose of Disbursement LP Legal Expenses Candidate Name	<div> <div>3000.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Star Envelope	Transaction ID: SB21B.81733 Date of Disbursement
Mailing Address PO box 740209, Dept. 40008	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 3 1 / 2 0 0 9</div> </div>
City State Zip Code Atlanta GA 30374-0209	Amount of Each Disbursement this Period
Purpose of Disbursement Non Candidate Party Printing Serv Candidate Name	<div> <div>733.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

6803.59

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 138 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Target America

Mailing Address 10560 Main Street, Ste #301

City State Zip Code
Fairfax VA 22030-0000

Purpose of Disbursement
LNC Party Donor Prospect Program

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81734

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Target America

Mailing Address 10560 Main Street, Ste #301

City State Zip Code
Fairfax VA 22030-0000

Purpose of Disbursement
LNC Party Donor Prospect Program

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81813

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Telecompute Corporation

Mailing Address P.O. Box 106019

City State Zip Code
Atlanta GA 30348-6019

Purpose of Disbursement
Phone and Data Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81814

Date of Disbursement

08 / 13 / 2009

Amount of Each Disbursement this Period

36.13

SUBTOTAL of Disbursements This Page (optional)

2036.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 139 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Telecompute Corporation	Transaction ID: SB21B.81736 Date of Disbursement																				
Mailing Address P.O. Box 106019	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Atlanta State GA Zip Code 30348-6019	Amount of Each Disbursement this Period																				
Purpose of Disbursement Phone and Data Services Candidate Name	<table border="1"> <tr> <td colspan="10">84.48</td> </tr> </table>	84.48																			
84.48																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Terra Eclipse, Inc.	Transaction ID: SB21B.81816 Date of Disbursement																				
Mailing Address 9043 Soquel Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	3		2	0	0	9												
City Aptos State CA Zip Code 95003-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Website Management Candidate Name	<table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ticketmaster	Transaction ID: SB21B.81746 Date of Disbursement																				
Mailing Address 1601 Elm St., Ste. 700	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	0	9												
City Dallas State TX Zip Code 75201-0000	Amount of Each Disbursement this Period																				
Purpose of Disbursement Credit Card Processing Fee Candidate Name	<table border="1"> <tr> <td colspan="10">175.68</td> </tr> </table>	175.68																			
175.68																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3260.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Virginia Dept. of Taxation <hr/> Mailing Address PO Box 26644 <hr/> City Richmond State VA Zip Code 23261-6644 <hr/> Purpose of Disbursement VA - Withholding Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.81769 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 4 / 2 0 0 9</div> </div>
<div> <div>Amount of Each Disbursement this Period</div> <div>398.00</div> </div> <div> <div>001</div> <div>Category/Type</div> </div>	
B. Full Name (Last, First, Middle Initial) Virginia Dept. of Taxation <hr/> Mailing Address PO Box 26644 <hr/> City Richmond State VA Zip Code 23261-6644 <hr/> Purpose of Disbursement VA - Withholding Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.81768 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 8 / 2 0 0 9</div> </div>
<div> <div>Amount of Each Disbursement this Period</div> <div>404.00</div> </div> <div> <div>001</div> <div>Category/Type</div> </div>	
C. Full Name (Last, First, Middle Initial) Warner, Norcross & Judd <hr/> Mailing Address 1900 Fifth Third Center 111 Lyon Street NW <hr/> City Grand Rapids State MI Zip Code 49503-2487 <hr/> Purpose of Disbursement Legal Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.81818 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 3 / 2 0 0 9</div> </div>
<div> <div>Amount of Each Disbursement this Period</div> <div>500.00</div> </div> <div> <div>001</div> <div>Category/Type</div> </div>	

SUBTOTAL of Disbursements This Page (optional)

1302.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 141 / 152

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Washington Cable

Mailing Address 700 Seventh St SW

City Washington State DC Zip Code 20024-2484

Purpose of Disbursement
Cable Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81820

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

330.00

B.

Full Name (Last, First, Middle Initial)

Worldwide Express - DHL

Mailing Address 1911 North Ft. Myer Dr. Ste 108

City Arlington State VA Zip Code 22209-0000

Purpose of Disbursement
Shipping Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.81822

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

271.67

SUBTOTAL of Disbursements This Page (optional)

601.67

TOTAL This Period (last page this line number only)

104201.66

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Robert C. W. Benedict	Transaction ID: SB28A.81850 Date of Disbursement
Mailing Address 2400 Virginia Ave NW Apt C1125	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 8 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20037-2661	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Refund Candidate Name	<div> <div>25.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Kristina L. Dickinson	Transaction ID: SB28A.81847 Date of Disbursement
Mailing Address PO Box 108	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 6 / 2 0 0 9</div> </div>
City Montague State MA Zip Code 01351-0108	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Refund Candidate Name	<div> <div>10.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Carlons Jones	Transaction ID: SB28A.81849 Date of Disbursement
Mailing Address 3974 Highway 19 E	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 7 / 2 0 0 9</div> </div>
City Elizabethton State TN Zip Code 37643-5320	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Refund Candidate Name	<div> <div>25.00</div> <div>010</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 143 / 152

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Michael Vay

Mailing Address 107 Brookside Rd

City
Newtown Square

State
PA

Zip Code
19073-3806

Purpose of Disbursement
Contribution Refund

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB28A.81848

Date of Disbursement

MM / DD / YYYY
08 / 10 / 2009

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional)

50.00

TOTAL This Period (last page this line number only)

110.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 144 / 152

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Advanced Mailing Services, LLCNature of Debt (Purpose):
Non Candidate Party Mail-
ing Service

Mailing Address 14970 Farm Creek Drive

City State ZIP Code
Woodbridge VA 22191-3550

Outstanding Balance Beginning This Period

2148.07

Transaction ID: SD10.78788

Amount Incurred This Period

0.00

Payment This Period

2148.07

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Advanced Mailing Services, LLCNature of Debt (Purpose):
Non Candidate Party Mail-
ing Service

Mailing Address 14970 Farm Creek Drive

City State ZIP Code
Woodbridge VA 22191-3550

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.81851

Amount Incurred This Period

3454.07

Payment This Period

0.00

Outstanding Balance at Close of This Period

3454.07

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Arcade PressNature of Debt (Purpose):
Office Supplies

Mailing Address 5436 Harford Rd.

City State ZIP Code
Baltimore MD 21214-2292

Outstanding Balance Beginning This Period

730.00

Transaction ID: SD10.78789

Amount Incurred This Period

0.00

Payment This Period

730.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

3454.07

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 145 / 152

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 B & B Duplicators

 Nature of Debt (Purpose):
 Non Candidate Party Print-
 ing Service

Mailing Address 818 18th Street NW LL15

City	State	ZIP Code
Washington	DC	20006-0000

Outstanding Balance Beginning This Period

380.70

Transaction ID: SD10.78790

Amount Incurred This Period

0.00

Payment This Period

380.70

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 B & B Duplicators

 Nature of Debt (Purpose):
 Non Candidate Party Print-
 ing Service

Mailing Address 818 18th Street NW LL15

City	State	ZIP Code
Washington	DC	20006-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.81852

Amount Incurred This Period

380.70

Payment This Period

0.00

Outstanding Balance at Close of This Period

380.70

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 Christy Carmody

 Nature of Debt (Purpose):
 Non Candidate Party Editi-
 ng and Graphics

Mailing Address 1751 Camarillo Drive

City	State	ZIP Code
N. Las Vegas	NV	89031-0000

Outstanding Balance Beginning This Period

150.00

Transaction ID: SD10.78791

Amount Incurred This Period

0.00

Payment This Period

150.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

380.70

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 146 / 152

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Commonwealth Digital Office SolutionsNature of Debt (Purpose):
Copier Maintenance

Mailing Address 21205 Ridgetop Circle

City State ZIP Code
Sterling VA 20166-6501

Outstanding Balance Beginning This Period

153.98

Transaction ID: SD10.78792

Amount Incurred This Period

0.00

Payment This Period

153.98

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DirectLine Technologies, Inc.Nature of Debt (Purpose):
Non Candidate Party Phone-
bank Service

Mailing Address 1600 N. Carpenter Rd. #D

City State ZIP Code
Modesto CA 95351-1145

Outstanding Balance Beginning This Period

4000.00

Transaction ID: SD10.73319

Amount Incurred This Period

0.00

Payment This Period

4000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DirectMail.comNature of Debt (Purpose):
Non Candidate Party Maili-
ng ServiceMailing Address 5511 Ketch Road
Attn: Beverly KalbaughCity State ZIP Code
Prince Frederick MD 20678-0000

Outstanding Balance Beginning This Period

8296.74

Transaction ID: SD10.78793

Amount Incurred This Period

0.00

Payment This Period

8296.74

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
DirectMail.comNature of Debt (Purpose):
Non Candidate Party Mail-
ing ServiceMailing Address 5511 Ketch Road
Attn: Beverly KalbaughCity State ZIP Code
Prince Frederick MD 20678-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.81853

Amount Incurred This Period

868.97

Payment This Period

0.00

Outstanding Balance at Close of This Period

868.97

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Frye & Wolcott, CPAsNature of Debt (Purpose):
Accounting Services

Mailing Address 9161 Liberia Avenue, Suite 304

City State ZIP Code
Manassas VA 20110-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.81854

Amount Incurred This Period

3200.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3200.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Great American LeasingNature of Debt (Purpose):
Postage Meter Lease

Mailing Address PO Box 660831

City State ZIP Code
Dallas TX 75266-0831

Outstanding Balance Beginning This Period

215.61

Transaction ID: SD10.78794

Amount Incurred This Period

0.00

Payment This Period

215.61

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

4068.97

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Great American LeasingNature of Debt (Purpose):
Postage Meter Lease

Mailing Address PO Box 660831

City State ZIP Code
Dallas TX 75266-0831

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.81855

Amount Incurred This Period

188.11

Payment This Period

0.00

Outstanding Balance at Close of This Period

188.11

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Joe Ragan'sNature of Debt (Purpose):
Office Supplies

Mailing Address PO Box 125

City State ZIP Code
Springfield VA 22150-0125

Outstanding Balance Beginning This Period

574.63

Transaction ID: SD10.78795

Amount Incurred This Period

0.00

Payment This Period

574.63

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Joe Ragan'sNature of Debt (Purpose):
Office Supplies

Mailing Address PO Box 125

City State ZIP Code
Springfield VA 22150-0125

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.81856

Amount Incurred This Period

242.07

Payment This Period

0.00

Outstanding Balance at Close of This Period

242.07

1) SUBTOTALS This Period This Page (optional).....

430.18

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Meltwater News, Inc.Nature of Debt (Purpose):
Media Clipping Services

Mailing Address File # 51042 - Bibby Finc. Serv.

City State ZIP Code
Los Angeles CA 90074-1042

Outstanding Balance Beginning This Period

1250.00

Transaction ID: SD10.78796

Amount Incurred This Period

0.00

Payment This Period

1250.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
National Electronic Type, IncNature of Debt (Purpose):
Non Candidate Party Print-
ing Service

Mailing Address 2320 S. Kansas Ave

City State ZIP Code
Topeka KS 66611-0000

Outstanding Balance Beginning This Period

1056.06

Transaction ID: SD10.73323

Amount Incurred This Period

0.00

Payment This Period

1056.06

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
National Electronic Type, IncNature of Debt (Purpose):
Non Candidate Party Print-
ing Service

Mailing Address 2320 S. Kansas Ave

City State ZIP Code
Topeka KS 66611-0000

Outstanding Balance Beginning This Period

352.45

Transaction ID: SD10.78798

Amount Incurred This Period

0.00

Payment This Period

352.45

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

0.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
PAETEC - US LEC Corp.Nature of Debt (Purpose):
Phone and Data Services

Mailing Address PO Box 1317

City	State	ZIP Code
Buffalo	NY	14240-1317

Outstanding Balance Beginning This Period

1177.78

Transaction ID: SD10.78799

Amount Incurred This Period

0.00

Payment This Period

1177.78

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Target AmericaNature of Debt (Purpose):
Non Candidate Party Donor
Program

Mailing Address 10560 Main Street, Ste #301

City	State	ZIP Code
Fairfax	VA	22030-0000

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD10.78800

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Telecompute CorporationNature of Debt (Purpose):
Phone and data services

Mailing Address P.O. Box 106019

City	State	ZIP Code
Atlanta	GA	30348-6019

Outstanding Balance Beginning This Period

36.13

Transaction ID: SD10.78801

Amount Incurred This Period

0.00

Payment This Period

36.13

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

0.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
LIBERTARIAN NATIONAL COMMITTEE**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Terra Eclipse, Inc.Nature of Debt (Purpose):
Website Management

Mailing Address 9043 Soquel Dr.

City State ZIP Code
Aptos CA 95003-0000

Outstanding Balance Beginning This Period

3000.00

Transaction ID: SD10.78802

Amount Incurred This Period

0.00

Payment This Period

3000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Terra Eclipse, Inc.Nature of Debt (Purpose):
Website Management

Mailing Address 9043 Soquel Dr.

City State ZIP Code
Aptos CA 95003-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.81857

Amount Incurred This Period

2300.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2300.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Warner, Norcross & JuddNature of Debt (Purpose):
Legal ServicesMailing Address 1900 Fifth Third Center
111 Lyon Street NWCity State ZIP Code
Grand Rapids MI 49503-2487

Outstanding Balance Beginning This Period

500.00

Transaction ID: SD10.78803

Amount Incurred This Period

0.00

Payment This Period

500.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

2300.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LIBERTARIAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Washington CableNature of Debt (Purpose):
Cable Service

Mailing Address 700 Seventh St SW

City State ZIP Code
Washington DC 20024-2484

Outstanding Balance Beginning This Period

330.00

Transaction ID: SD10.78804

Amount Incurred This Period

0.00

Payment This Period

330.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Worldwide Express - DHLNature of Debt (Purpose):
Shipping Services

Mailing Address 1911 North Ft. Myer Dr. Ste 108

City State ZIP Code
Arlington VA 22209-0000

Outstanding Balance Beginning This Period

271.67

Transaction ID: SD10.78805

Amount Incurred This Period

0.00

Payment This Period

271.67

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Worldwide Express - DHLNature of Debt (Purpose):
Shipping Services

Mailing Address 1911 North Ft. Myer Dr. Ste 108

City State ZIP Code
Arlington VA 22209-0000

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.81858

Amount Incurred This Period

56.11

Payment This Period

0.00

Outstanding Balance at Close of This Period

56.11

1) SUBTOTALS This Period This Page (optional).....

56.11

2) TOTALS This Period (last page this line number only).....

10690.03

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

10690.03